

**West Virginia State Treasurer's Office
Non-Repetitive Wire Form**

Participant Accounting
322 70th Street SE
Charleston, WV 25304
Phone: 340-1577
Fax: 340-1507

Date to be wired: _____ **Document Number:** _____

Agency Requesting Wire Release: _____

Bank Name: _____

Bank Phone Number: _____

ABA/Routing #: _____

Bank Account #: _____

Beneficiary Name: _____

Beneficiary Address: _____

Additional Wiring Information: _____

Correspondent Bank Information: _____

Contact Person/Additional Information: _____

If wire must be received by a specific time, please note: _____

Signature of Agency Representative: _____