

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

Participant Accounting  
322 70<sup>th</sup> St SE  
Charleston, WV 25304  
Phone: (304) 340-1577  
Fax: (304) 340-1507

Date to be wired: \_\_\_\_\_ Document Number: \_\_\_\_\_

Spending Unit Requesting Wire Release: \_\_\_\_\_

\_\_\_\_\_

Bank Name: \_\_\_\_\_

SWIFT Code: \_\_\_\_\_

Bank City and Country: \_\_\_\_\_

Beneficiary Name: \_\_\_\_\_

IBAN: \_\_\_\_\_

Beneficiary Street Address: \_\_\_\_\_

Beneficiary City and Country: \_\_\_\_\_

Additional Information: \_\_\_\_\_

\_\_\_\_\_

**FOREIGN WIRE DISCLAIMER: The Spending Unit hereby authorizes the State Treasurer's Office to make the foreign wire transfer on this form. The Spending Unit agrees to be responsible for any loss that occurs if the instructions on this form are incomplete, ambiguous, or incorrect. The Spending Unit further agrees to accept all risk and liability involved with this foreign wire transfer. In the event the State Treasurer's Office deems the risk to be too great, the State Treasurer's Office may in its sole discretion decide not to complete the foreign wire transfer.**

I hereby certify that I am authorized to act on behalf of the Spending Unit and that the information contained in this form is true, accurate and complete, to the best of my knowledge.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_