

# Foreign Wire Transfer Form

<b>Reimbursement Currency*</b>	
<b>Bank Name*</b>	
<b>Bank Address*</b>	
<b>BIC, Swift Code, ABA Routing Number*:</b>	
<b>Account Number:*</b>	
<b>Name on the Account:*</b>	
<b>Address of Beneficiary:*</b>	
<b>IBAN Number:</b>	

<b>Reimbursement Information</b>	
<b>Traveler's Name:*</b>	
<b>Trip Destination:*</b>	
<b>Dates of Travel:*</b>	
<b>KFS Pre-Payment Document Number:</b>	

Return this form to *icamadmin@ucdavis.edu*