Incoming Department Wire/ACH Form

University of Wisconsin – Madison
Accounting Services – Cash Management
Suite 6101, 21 North Park Street, Madison WI 53715-1218

You must download this form (top, right hand navigation bar) in order for the fillable fields to be visible.

Please complete this form, save, and email to Cash Management (cashmgt@bussvc.wisc.edu) with *Incoming Wire, Dollar Amount, and Customer Name* in the subject line. For example, "Incoming Wire, $1,000, Merck" would be in the subject line to indicate an incoming wire is anticipated for $1,000 from Merck.

Also include in the email an invoice or supporting documentation for the wire or ACH.

Customer Information (person/company sending the wire/ACH)

Name: _____

Address: _____

City, State, Zip: _____

Country: _____

Communication Date: _____

(The date you communicated the amount due and bank information to the payee/customer.)

Accounting Details

Dollar Amount: _____ (please use commas and a decimal point, ex $1,000.00)

Check one: ☐ Exact Amount ☐ Estimated Amount

Department ID: _____ Fund: _____

Program: _____ Project: _____ Account: _____

Department Invoice No.: _____ (if applicable)

Your Information

Name: _____

Department: _____

Phone: _____

Fax: _____

email: _____

Comments

Please return form via email to cashmgt@bussvc.wisc.edu