

ACH/Wire (Electronic Transfer) Request Form

Type of Payment (Please circle one):

ACH - Sent one day and received the following day - These are sent on Fridays, unless otherwise requested.

Wire - Sent and received within the same day - \$35 cost.

Reason for Payment: _____

Sender's Details

U.Va. Fund Project Name: _____

U.Va. Fund Project Number
(to deduct funds and fee): _____

Amount: _____

Authorized Representative's Phone Number: _____

Authorized Representative's Email Address: _____

Authorized Representative's Name: _____

Authorized Representative's Signature: _____

Recipient's Details

Name: _____

Bank: _____

ABA Routing No.: _____

Account No.: _____

Account Type: Checking or Savings (circle one)

We strongly encourage sending a voided check along with this request to help ensure that the correct information is captured.

Please fax this form to the UVA Fund, 434-924-7032. You may email uvafund@virginia.edu to confirm receipt.