



OFFICE OF THE CONTROLLER
Cash Management
Administration Bldg. Room 290
tel: 561-297-1425
fax: 561-297-1060

IAT (International ACH Transactions) COMPLIANCE FORM

Any vendor, employee or student receiving ACH/direct deposit payments from Florida Atlantic University and then forwarding those funds to a bank in another country, must complete this form.

Instructions: Complete lines 2. through 10. and return to: Dianna Zaia Cash Management; Administration Bldg (10 Room 290 of fax to 561-297-1060

- 1 Name of originator of Payment Florida Atlantic University
2 Beneficiary Name (your name or company name)
3 Beneficiary Address
4 Beneficiary Bank
5 Employee ID, Student ID, vendor ID (Z number)
6 Type of payment from FAU (for example: vendor payment, student refund, payroll)
7 Country to which the funds are transferred:
8 Percentage of payment to be transferred to another country (100% or specify if a lesser %)
9 Method of transferring funds out of U.S. Wire transfer, Check, Other electronic payment
10 Signature: Date: