FOREIGN VENDOR PAYMENT INFORMATION (WIRE TRANSFER/CHECK)

VENDOR REMITTANCE INFORMATION **DATE:** _____

Dear Vendor: due to different banking requirements of various countries, we request your assistance in ensuring your payments are received in a timely manner. The information requested below will benefit all concerned by having your payments deposited to your bank account as expeditiously as possible.

_____INITIAL SUBMISSION (FOR THIS PROJECT) _____UPDATED VENDOR INFOMATION

VENDOR DUNS _____ **NCAGE** _____ **NAME** _____

VENDOR PHYSICAL ADDRESS: _____

(Note: Physical address, DUNS, _____

& NCAGE must match SAM.gov.) _____

VENDOR BUSINESS OFFICE POINT OF CONTACT (FOR INDIVIDUAL SIGNING BELOW)

NAME: _____

TELEPHONE NUMBER: _____

POSITION TITLE: _____

DESCRIPTIVE TITLE OF PROJECT: _____

U.S. FUNDING AGENCY: Air Force Office of Scientific Research (AFOSR)

PAYMENT METHOD: [x] WIRE TRANSFER VIA ITS.GOV [ ] PAPER CHECK

IS VENDOR'S BANK PART OF THE SWIFT NETWORK (http://www.swift.com)? IF SO, PLEASE PROVIDE BANKING INFORMATION BELOW. IF NOT, A CHECK WILL BE ISSUED, WHICH MAY ADD UP TO 6 WEEKS OF DELAY TO RECEIVING PAYMENTS.

BANK NAME: _____

ACCOUNT HOLDER (IF OTHER THAN VENDOR): _____

SWIFT BANK IDENTIFICATION CODE (BIC): _____

INTERNATIONAL BANK ACCOUNT NUMBER (IBAN): _____

OTHER BANKING INFORMATION (OPTIONAL): Please specify currency denomination of account

SIGNATURE OF BUSINESS OFFICE POINT OF CONTACT: _____

Please update this information as soon as possible if any of the banking information changes. Your attention to this matter will help us to continue to provide you with the customer service you deserve and reduce the possibility of delayed payments. Please scan and email this form to whoever provided it, or fax to 614-701-2667 (dialing to United States).

Reginald Bossie, Accounts Payables Director, DFAS Limestone

US GOVERNMENT USE ONLY: INVOICE CONTROL NUMBER (ICN): _____