

OFFICE OF THE CONTROLLER  
INCOMING WIRE / ACH CLAIM FORM

**Instructions:**

Complete this form when you are expecting an incoming wire/ACH payment

**All fields must be completed**

When form is complete, save for your records and send in an email to [financial\\_reporting@etal.uri.edu](mailto:financial_reporting@etal.uri.edu)

If you have any questions or need help locating a payment, please contact Dave Gentile at [david-gentile@uri.edu](mailto:david-gentile@uri.edu)

Type of payment:  Domestic  International

expecting payment  payment already received

Approximate Receipt Date:

Chartfield for applying payment:

Vendor name & address:

Total Amount:

Invoice Number:

Additional Payment  
Information:

Department Contact Name:

Email:

Phone: