

**Santa Clara University**

**Payments for Services Provided Outside the United States**

**Name of Business or Individual:**

**Country of Residence: Permanent Residence Address:**

Street address: City, town, state, or province, and postal code if applicable: Country (do not abbreviate):

**Description of services rendered:**

**Date(s) of services: Location of services: Amount billed for services:**

**Circle type of entity:** Individual Corporation Partnership Government

International Organization Tax-exempt organization University

Other (please describe)

U.S. Citizen or Legal Resident. **Provide SSN or U.S. tax payer identification number:**

Non-U.S. Citizen

**Foreign tax identifying number, if any:**

**Payment Options (circle one):**

Wire ACH (U.S. Direct Deposit) Check Concur credit card Personal credit card Cash

For Wire Transfer or ACH (U.S. Direct Deposit): Name on Account:

Bank Name: Bank Address:

ABA Number:

Bank Account Number:

International SWIFT Code (wire transfer only):

IBAN Number:

For U.S. Dollar Check\*, my mailing address is: Street:

City, State: Zip: Country:

*\*In many cases, U.S. Dollar checks cannot be cashed at a non-U.S. bank, and can only be used to deposit into a U.S. bank account.*

**I certify or affirm that:**

1.) I am not a U.S. Citizen or Permanent Resident, or Resident Alien for U.S. Tax Purposes, and;

2.) All of the services performed, or to be performed, on behalf of Santa Clara University, as agreed upon under separate contract or other document, will be performed outside of the USA. All services will be conducted in the country of



Print Name



Signature Date (MM-DD-YY)

**Return completed form to your Santa Clara University contact / partner:**

**Name:**

**Address:**

**Email:**

**Fax:**