



Vendor ACH/Wire Request Form

Vendor Name: _____

Vendor Address: _____

Contact Name: _____

*Contact Phone #: _____

Email: _____

Name on Bank Account: _____

Bank Account Number: _____

ABA or Routing Number: _____

Bank Name: _____

If Applicable

SWIFT: _____

IBAN: _____

*Verbal confirmation is required by Brado policy prior to initiating ACH setup.

Who's your contact at Brado? _____