

## **Wyoming State Auditor's Office**

Herschler Building, 122 W. 25<sup>th</sup> Street, E400 Cheyenne, Wyoming 82002 (307) 777-5258 or SAOWOLFSHelpDesk@wyo.gov

## **Banking Verification Form**

Date	Agen	cy Representative Name	Agency Number
Vendor/Employee	Number	Vendor/Employee Name	
	nail commur		employee should never be processed ve must confirm the change through a employee.
Vendor Representa	ative / Emp	loyee Phone	
Vendor Representa	ative / Emp	loyee Name Vendor Po	sition Title
the call-back numb	er for the v		uthorized: (1) provide the source of from the person requesting the employee or vendor.
Signature		Date	

Bank account fraud is a critical risk to the State of Wyoming. You, the agency representative, are our best line of defense against bank account fraud. You know your vendors and employees best! Always "sniff test" each banking change to make sure it makes sense. Is the individual authorized to make such a change? Are there typos, grammatical errors, or a sense of urgency about the request? If a payment lands in a fraudster's account, it is usually impossible to retrieve funds, and the agency or State could be held liable if the Wyoming State Auditor's Office procedures were not followed.