# Financial Transactions and Reports Analysis Centre of Canada (FINTRAC)

# Standard Batch Reporting Instructions and Specification Version 3.1

**MODULE 4** 

**Includes specifications for Non-SWIFT EFT reports (EFTO and EFTI)** 

### 5.2.3 Detailed Specification Layout (Format Version 03) — Non-SWIFT Electronic Funds Transfer Reports

The following specifications outline the format for international non-SWIFT electronic funds transfer (EFT) reports included in a batch, based on batch report format version 03. All previous batch formats (versions 01 and 02) will no longer be supported upon implementation of version 03.

There are two distinct types of non-SWIFT EFT reports, as follows:

- Electronic Funds Transfer Report Outgoing (EFTO)
   The detailed specification layout for an EFTO, based on batch format version 03 is contained in Section 5.2.3.1
- Electronic Funds Transfer Report Incoming (EFTI)
   The detailed specification layout for an EFTI, based on batch format version 03 is contained in Section 5.2.3.2.

There are three new fields in Part A of the EFTO and EFTI (reporting entity report reference number, action code, and 24-hour rule indicator) and two new fields in Part C of the EFTO and Part E of the EFTI (reporting entity's identifier number and location number) in format version 03 that were not in previous batch format versions. There are also new values possible for fields B14, D12, F14 and G12. The order for province and country have been reversed in the following: fields B7 and B8, D7 and D8, E7 and E8, F7 and F8, as well as G7 and G8 in the EFTO and fields B7 and B8, C7 and C8, D7 and D8, F7 and F8, as well as G7 and G8 in the EFTI. In addition, the following fields have been eliminated in format version 03: EFTO fields C1 to C9 and EFTI fields E1 to E9. The following fields in Parts B and F of the EFTO and EFTI have not changed from format version 02, but were different in format version 01: B13 and F13. Field A1 (time sent) is different from both previous format versions.

Any report parts that are not applicable do not need to be included. However, all fields in each applicable part must be included, unless you are deleting a report (as explained in Section 3.4 and Part A below). If any fields in applicable parts have no data, pad those fields with spaces or zeros according to the required field format.

For additional information about EFT report fields, refer to *Guideline 8: Submitting Electronic Funds Transfer Reports to FINTRAC*.

The layout for each EFTO and EFTI report will be in the order presented in the tables below (i.e., Part A, Part B, Part C, etc.).

### 5.2.3.1 Detailed specification layout (format version 03): Non-SWIFT Electronic Funds Transfer Report — Outgoing (EFTO)

			Batch format version 03: EFTO		
	Part A – Transaction information This part is for information about when the EFT was sent.				
Field No.	Field Name	Format	Comment		
±	Part ID	X(2)	"A1"		
±	Report sequence number	9(5)RJZ	Report sequence number within the preceding sub-header.		
±	Report sequence number  Reporting entity report reference	X(20)LJ	A unique report reference number is required for each report		
=	number	$\Lambda(20)LJ$	submitted from the same reporting entity.		
	number		If you need to access this report in F2R, as explained in		
			Section 3.4.2, your report reference number will be in field 1A		
			of the part called "General Information". This additional part		
			will also contain the contact information applicable to this report		
			(from your batch header).		
±	Action code	X(1)	If you are submitting a new batch (batch type "A"), enter "A" to		
			indicate there is no change or deletion as this is a new report.		
			If you are submitting a correction batch (batch type "C"),		
			indicate whether this report is to be changed or deleted from a		
			previously accepted batch.		
			To <b>change</b> a report, use the action code "C" and complete the		
			rest of the report.		
			To <b>delete</b> a report, use the action code of "D" and include the		
1	Tr: C	N/(C)I I	entire report being deleted.		
1	Time of transaction	X(6)LJ	Use for the time that the electronic funds transfer was sent. Time format HHMMSS (space fill if unknown).		
			This field requires reasonable efforts.		
*2	Date of transaction	X(8)LJ	Use for the date of the electronic funds transfer transmission.		
	Dute of transaction	A(O)L3	Date format YYYYMMDD		
			Date should be no earlier than five years before the report		
			submission date. It cannot be a future date.		
			This field is mandatory. If it is not included, the report will be		
			rejected.		
*3	Amount of transaction	X(15)d	Use for the amount of outgoing funds involved in the		
		RJZ	transaction, including two decimal places.		
			This field is mandatory. If it is not included, the report will be		
2.1		0(1)	rejected.		
±3A	24-hour rule indicator	9(1)	If a report is about an EFT of less than \$10,000 that is one of		
			two or more EFTs of less than \$10,000 made within 24		
			consecutive hours of each other that total \$10,000 or more, use the 24-hour rule indicator of "1". Each such EFT is submitted		
			on a separate report.		
			If the transaction being reported is of \$10,000 or more, enter		
			"0".		
			This field is required. If it is invalid, the report will be rejected.		
			If you need to access this report in F2R, as explained in		
			Section 3.4.2, this information will be in the field above field 1		
			in Part A.		

			Batch format version 03: EFTO			
Part A – T	Part A – Transaction information					
This part is	for information about when the EF	T was sent.				
Field No.	Field Name	Format	Comment			
*4	Transaction currency	X(3)LJ	Use for the currency of the funds involved in the outgoing funds transferred. Refer to the currency code table in the technical documentation area of the Publications page on FINTRAC's Web site.  This field is mandatory. If it is not included, the report will be rejected.			
5	Exchange rate	X(12)d RJZ	Use for the actual exchange rate applied to the transfer to convert the amount sent <b>from</b> Canadian dollars to the amount and currency shown in fields A3 and A4 above, including a floating decimal place.  This field requires reasonable efforts.			
	Total characters in Part A:	<mark>73</mark>	Each EFTO must include Part A.			

#### Part B - Information about the client ordering the EFT

Batch format version 03: EFTO

This part is for information about the individual or entity ordering you to send the EFT. If the individual or entity that ordered the EFT did so on someone else's behalf, you also have to complete Part D.

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"B1"
*1	Full name of ordering client (if client is an entity)	X(45)LJ	Use for the name of the <b>entity</b> ordering the EFT. Field B1 is mandatory. If it is not included in the report, and there is no name entered in fields B2 and B3, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for field B1 was not obtained at the time of the transaction (and is not available from your records), you can space-fill this field. If the ordering client is an <b>individual</b> , field B1 should be space-filled.
*2-4	Full name of ordering client (if client is an individual)  *2 Individual's surname  *3 Individual's given name  4 Individual's other  name/initial	X(20)LJ X(15)LJ X(10)LJ	Use for the name of the <b>individual</b> ordering the EFT. Fields B2 and B3 are mandatory. If they are not included in the report, and there is no entry in field B1, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for fields B2 and B3 was not obtained at the time of the transaction (and is not available from your records), you can leave these fields blank (i.e., spacefilled).  If the ordering client is an <b>entity</b> , fields B2, B3 and B4 should be space-filled.
5-9	Client's full address 5 Street address 6 City 7 Country 8 Province/State 9 Postal/zip code	X(30)LJ X(25)LJ X(2)LJ X(20)LJ X(9)LJ	Enter the civic address, town or city, country, province or state and postal or zip code of the client ordering the EFT. These fields require reasonable efforts.
10	Client's telephone number	X(20)LJ	This field requires reasonable efforts.

D (D			Batch format version 03: EFTO
	Information about the client order		dering you to send the EFT. If the individual or entity that ordered
	did so on someone else's behalf, you		
11	Individual's date of birth	X(8)LJ	Applicable only if the client ordering the EFT is an <b>individual</b> .  Date format YYYYMMDD. Must be later than 1880 and cannot be a future date.  This field requires reasonable efforts.  If the client ordering the EFT is an <b>entity</b> , this field should be space-filled.
12	Individual's occupation	X(30)LJ	Applicable only if the client ordering the EFT is an <b>individual</b> . This field requires reasonable efforts.  If the client ordering the EFT is an <b>entity</b> , this field should be space-filled.
*13	Client's account number	X(30)LJ	Mandatory (if applicable). If there is no client account number, the field should be space-filled.  Note: Field B13 was different in format version 01.
14	Individual's identifier	X(1)LJ	Applicable only if the client ordering the EFT is an individual.  Enter the appropriate value to show the document used to identify the client who ordered the EFT. If the selections provided do not cover the identifier used, indicate "Other" and provide details in field B14A.  Code Description  A Driver's licence B Birth certificate C Provincial health card D Passport E Other F Record of Landing or Permanent residence card This field requires reasonable efforts.  If the client ordering the EFT is an entity, this field should be space-filled.
14A	Other description	X(20)LJ	Provide a description of "Other" as explained above. This field is required if code "E" is entered in field B14.  Note: This field was renumbered from B14E to B14A.
15	ID number	X(20)LJ	Enter the number of the document described in field B14 that was used to identify the client ordering the EFT.  This field requires reasonable efforts.
	Total characters in Part F	3: 307	Each EFTO must include Part B.

 $Part\ C\ -\ Information\ about\ the\ sender\ of\ the\ EFT\ (i.e.,\ the\ individual\ or\ entity\ that\ sends\ the\ payment\ instructions)$ 

This part is for information about the reporting entity sending the payment instructions.

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"C1"
<mark>1</mark> *	Reporting entity's identifier number	9(7)RJZ	This is your seven-digit identifier number assigned to you by FINTRAC at enrolment. For more information about this, contact your F2R administrator.  This field is mandatory. If it is invalid, the report will be rejected.  If you need to access this report in F2R, as explained in Section 3.4.2, your name will be displayed in Part C instead of your reporting entity identifier number.
<u>5</u> *	Reporting entity's location number	X(15)LJ	This represents information about the full address of the person or entity sending the payment instructions. Location numbers are assigned during the FINTRAC enrolment process and maintained by your F2R administrator. For more information about this, contact your F2R administrator. For deposit taking institutions, this number is the branch portion of your transit number with leading zeroes. For example, the location number for branch 02831 of bank number 0004 would be 02831. For other types of reporting entities, this number will be created and assigned to you by FINTRAC. This field is mandatory. If it is invalid, the report will be rejected.  If you need to access this report in F2R, as explained in Section 3.4.2, the full address will be displayed in Part C along with your reporting entity location number.
	Total characters in Part C:	24	Each EFTO must include Part C.

#### **Batch format version 03: EFTO**

If the third party is an entity, fields D2, D3 and D4 should be

### Part D - Information about a third party if the client ordering the EFT is acting on behalf of a third party (if applicable)

This part is for information about any third party on whose behalf the EFT was ordered. If there was no third party related to the EFT order, do not complete this part.

Field No. Field Name Format Comment "D1" Part ID X(2)± Full name of third party (if the If the client ordering the EFT is acting on behalf of a third party, X(45)LJ 1 third party is an entity) use this field for the name of the third party **entity**. This field requires reasonable efforts. If the third party is an individual, field D1 should be spacefilled. 2-4 Full name of third party (if the If the client ordering the EFT is acting on behalf of a third party, third party is an individual) use these fields for the name of the third party individual. 2 Individual's surname These fields require reasonable efforts. X(20)LJ

space-filled.

X(15)LJ

X(10)LJ

3 Individual's given name

4 Individual's other name/initial

#### **Batch format version 03: EFTO** Part D - Information about a third party if the client ordering the EFT is acting on behalf of a third party (if applicable)

This part is for information about any third party on whose behalf the EFT was ordered. If there was no third party related to the EFT order, do not complete this part.

Field No.	Field Name	Format	Comment
5-9	Full address of third party		If the client ordering the EFT is acting on behalf of a third party,
	5 Street address	X(30)LJ	enter the civic address, town or city, country, province or state
	6 City	X(25)LJ	and postal or zip code of the third party.
	7 Country	X(2)LJ	These fields require reasonable efforts.
	8 Province/State	X(20)LJ	
	9 Postal/zip code	X(9)LJ	
10	Individual's date of birth	X(8)LJ	Applicable only if the client ordering the EFT is acting on
			behalf of a third party <b>individual</b> .
			Date format YYYYMMDD. Must be later than 1880 and cannot
			be a future date.
			This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.
11	Individual's occupation	X(30)LJ	Applicable only if the client ordering the EFT is acting on
			behalf of a third party <b>individual</b> .
			This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.
12	Individual's identifier	X(1)LJ	If the client ordering the EFT is acting on behalf of a third party
			individual, enter the appropriate value to show the document
			used to identify the third party.
			If the selections provided do not cover the identifier used,
			indicate "Other" and provide details in field D12A.
			Code Description
			A Driver's licence
			B Birth certificate
			C Provincial health card
			D Passport
			E Other
			F Record of Landing or Permanent residence card
			This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.
12A	Other description	X(20)LJ	Provide a description of "Other" as explained above. This field
	F	( - / -	is required if code "E" is entered in field D12.
			Note: This field was renumbered from D12E to D12A.
Total characters in Part D: 237			If the client ordering the EFT was not acting on behalf of a third
			party, do not include Part D in the report for that transaction.

# Batch format version 03: EFTO Part E – Information about the receiver of the EFT (i.e., the individual or entity that receives the payment instructions)

This part is for information about the individual or entity to which you are sending the payment instructions.

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"E1"
*1	Full name of receiver (if receiver	X(45)LJ	Use for the name of the <b>entity</b> receiving the EFT payment
	is an entity)		instructions.
			Field E1 is mandatory. If it is not included in the report, and
			there is no name entered in fields E2 and E3, the report will be
			rejected. If the 24-hour rule indicator ("1") is used in field
			A3Aand, because of this, information for field E1 was not
			obtained at the time of the transaction (and is not available from
			your records), you can space-fill this field.
			If the receiver is an <b>individual</b> , field E1 should be space-filled.
*2-4	Full name of receiver (if the		Use for the name of the <b>individual</b> receiving the EFT payment
	receiver is an individual)		instructions.
	*2 Individual's surname	X(20)LJ	Fields E2 and E3 are mandatory. If they are not included in the
	*3 Individual's given name	X(15)LJ	report, and there is no entry in field E1, the report will be
	4 Individual's other	X(10)LJ	rejected. If the 24-hour rule indicator ("1") is used in field A3A
	name/initial		and, because of this, information for fields E2 and E3 was not
			obtained at the time of the transaction (and is not available from
			your records), you can space-fill these fields.
			If the receiver is an <b>entity</b> , fields E2, E3 and E4 should be
			space-filled.
*5-9	Receiver's full address		Enter the civic address, town or city, country, province or state
	*5 Street address	X(30)LJ	and postal or zip code of the receiver of the EFT payment
	*6 City	X(25)LJ	instructions.
	*7 Country	X(2)LJ	These fields are mandatory. If the 24-hour rule indicator ("1") is
	*8 Province/State	X(20)LJ	used in field A3A and, because of this, information for fields E5
	*9 Postal/zip code	X(9)LJ	to E9 was not obtained at the time of the transaction (and is not
			available from your records), you can space-fill these fields.
	Total characters in Part E: 178		Each EFTO must include Part E.

**Batch format version 03: EFTO** 

Part F – Information about the beneficiary client (i.e., individual or entity to whose benefit the payment is made) This part is for information about the individual or entity to whose benefit the payment of the EFT was made (or will be made).

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"F1"
*1	Full name of beneficiary client (if beneficiary client is an entity)	X(45)LJ	Use for the name of the <b>entity</b> to whose benefit the EFT payment is made. Field F1 is mandatory. If it is not included in the report, and there is no name entered in fields F2 and F3, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for field F1 was not obtained at the time of the transaction (and is not available from your records), you can space-fill this field. If the beneficiary client is an <b>individual</b> , field F1 should be space-filled.
*2-4	Full name of beneficiary client (if beneficiary client is an individual)  *2 Individual's surname  *3 Individual's given name  4 Individual's other  name/initial	X(20)LJ X(15)LJ X(10)LJ	Use for the name of the <b>individual</b> to whose benefit the EFT payment is made. Fields F2 and F3 are mandatory. If they are not included in the report, and there is no entry in field F1, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for fields F2 and F3 was not obtained at the time of the transaction (and is not available from your records), you can space-fill these fields. If the beneficiary client is an <b>entity</b> , fields F2, F3 and F4 should be space-filled.
5-9	Beneficiary client's full address 5 Street address 6 City 7 Country 8 Province/State 9 Postal/zip code	X(30)LJ X(25)LJ X(2)LJ X(20)LJ X(9)LJ	Enter the civic address, town or city, country, province or state and postal or zip code of the beneficiary of the EFT payment. These fields require reasonable efforts.
10	Beneficiary client's telephone number	X(20)LJ	This field requires reasonable efforts.
11	Individual's date of birth	X(8)LJ	Applicable only if the beneficiary client is an <b>individual</b> . Format YYYYMMDD. Must be later than 1880 and cannot be a future date.  This field requires reasonable efforts.  If the beneficiary client is an <b>entity</b> , this field should be spacefilled.
12	Individual's occupation	X(30)LJ	Applicable only if the beneficiary client is an <b>individual</b> . This field requires reasonable efforts.  If the beneficiary client is an <b>entity</b> , this field should be spacefilled.
*13	Beneficiary client's account number	X(30)LJ	Mandatory (if applicable). If there is no client account number, the field should be space-filled.  Note: Field F13 was different in format version 01.

Part F – Information about the beneficiary client (i.e., individual or entity to whose benefit the payment is made) This part is for information about the individual or entity to whose benefit the payment of the EFT was made (or will be made).

Field No.	Field Name	Format	Comment
14	Individual's identifier	X(1)LJ	Applicable only if the beneficiary client is an individual. Enter the appropriate value to show the document used to identify the beneficiary client. If the selections provided do not cover the identifier used, indicate "Other" and provide details in field F14A.  Code Description  A Driver's licence B Birth certificate C Provincial health card D Passport E Other F Record of Landing or Permanent residence card This field requires reasonable efforts.  If the beneficiary client is an entity, this field should be space-filled.
14A	Other description	X(20)LJ	Provide a description of "Other" as explained above. This field is required if code "E" is entered in field F14.  Note: This field was renumbered from F14E to F14A.
	Total characters in Part F:	287	Each EFTO must include Part F.

#### Part G - Information about a third Party if the beneficiary client is acting on behalf of a third party (if applicable)

This part is for information about any third party on whose behalf the EFT payment is made. If there is no third party related to the EFT payment, do not complete this part.

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"G1"
1	Full name of third party (if the third party is an entity)	X(45)LJ	If the beneficiary client is acting on behalf of a third party, use this field for the name of the third party <b>entity</b> . This field requires reasonable efforts.  If the third party is an <b>individual</b> , field G1 should be spacefilled.
2-4	Full name of third (if the third party is an individual) 2 Individual's surname 3 Individual's given name 4 Individual's other name/initial	X(20)LJ X(15)LJ X(10)LJ	If the beneficiary client is acting on behalf of a third party, use this field for the name of the third party <b>individual</b> . These fields require reasonable efforts.  If the third party is an <b>entity</b> , fields G2, G3 and G4 should be space-filled.
5-9	Full address of third party 5 Street Address 6 City 7 Country 8 Province/State 9 Postal/zip code	X(30)LJ X(25)LJ X(2)LJ X(20)LJ X(9)LJ	If the EFT was paid on behalf of a third party, enter the civic address, town or city, country, province or state and postal or zip code of the third party.  These fields require reasonable efforts.
10	Individual's date of birth	X(8)LJ	Applicable only if the EFT was paid on behalf of a third party individual.  Format YYYYMMDD. Must be later than 1880 and cannot be a future date.  This field requires reasonable efforts.  If the third party is an entity, this field should be space-filled.
11	Individual's occupation	X(30)LJ	Applicable only if the EFT was paid on behalf of a third party individual. This field requires reasonable efforts.  If the third party is an entity, this field should be space-filled.
12	Individual's identifier	X(1)LJ	If the EFT was paid on behalf of a third party individual, enter the appropriate value to show the document used to identify the third party.  If the selections provided do not cover the identifier used, indicate "Other" and provide details field G12A.  Code Description  A Driver's licence B Birth certificate C Provincial health card D Passport E Other F Record of Landing or Permanent residence card  This field requires reasonable efforts.  If the third party is an entity, this field should be space-filled.
12A	Other description	X(20)LJ	Provide a description of "Other" as explained above. This field is required if code "E" is entered in field G12.  Note: This field was renumbered from G12E to G12A.
	Total characters in Part G:	237	If the beneficiary client is acting on behalf of a third party, do not include Part G in the report for that transaction.

### 5.2.3.2 Detailed specification layout (format version 03) —Electronic Funds Transfer Report — Incoming (EFTI)

	Transaction Information		Batch format version 03: EFTI
Field No.	s for information about when the EF Field Name	Format	Comment
±	Part ID	X(2)	"A1"
±	Report sequence number	9(5)RJZ	Report sequence number within the preceding sub-header.
<u>±</u>	Report sequence number  Reporting entity report reference number	X(20)LJ	A unique report reference number is required for each report submitted from the same reporting entity.  If you need to access this report in F2R, as explained in Section 3.4.2, your report reference number will be in a part called "General Information". This additional part will also contain the contact information applicable to this report (from your batch header).
±	Action code	X(1)	If you are submitting a new batch (batch type "A"), enter "A" to indicate there is no change or deletion as this is a new report. If you are submitting a correction batch (batch type "C"), indicate whether this report is to be changed or deleted from a previously accepted batch.  To <b>change</b> a report, use the action code "C" and complete the rest of the report.  To <b>delete</b> a report, use the action code "D" and include the entire report being deleted.
1	Time of transaction	X(6)LJ	Use for the time that the electronic funds transfer was sent. Time format HHMMSS (space fill if unknown). This field requires reasonable efforts.
*2	Date of transaction	X(8)LJ	Use for the date of the electronic funds transfer transmission.  Date format YYYYMMDD  Date should be no earlier than five years before the report submission date. It cannot be a future date.  This field is mandatory. If it is not included, the report will be rejected.
*3	Amount of transaction	X(15)d RJZ	Use for the amount of incoming funds involved in the transaction, including two decimal places.  This field is mandatory. If it is not included, the report will be rejected.
±3A	24-hour rule indicator	9(1)	If a report is about an EFT of less than \$10,000 that is one of two or more EFTs of less than \$10,000 made within 24 consecutive hours of each other that total \$10,000 or more, use the 24-hour rule indicator of "1". Each such EFT is submitted on a separate report.  If the transaction being reported is of \$10,000 or more, enter "0". This field is required. If it is not included, the report will be rejected.  If you need to access this report in F2R, as explained in Section 3.4.2, this information will be in the field above field 1 in Part A.

			Batch format version 03: EFTI			
Part A – T	Part A – Transaction Information					
This part is	for information about when the EF	T was sent.				
Field No.	Field Name	Format	Comment			
*4	Transaction currency	X(3)LJ	Use for the currency of the funds involved in the incoming funds transferred. Refer to the currency code table in the technical documentation area of the Publications page on FINTRAC's Web site.  This field is mandatory. If it is not included, the report will be rejected.			
5	Exchange rate	X(12)d RJZ	Use for the actual exchange rate applied to the transfer to convert the amount shown in fields A3 and A4 above <b>to</b> Canadian dollars, including a floating decimal place. This field requires reasonable efforts.			
	Total characters in Part A:	<mark>73</mark>	Each EFTI must include Part A.			

Part B - Information about the client ordering the EFT

This part is for information about the individual or entity that ordered the EFT to be sent to you. If the individual or entity that ordered the EFT did so on someone else's behalf, you also have to complete Part D.

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"B1"
*1	Full name of ordering client (if client is an entity)	X(45)LJ	Use for the name of the <b>entity</b> ordering the EFT. Field B1 is mandatory. If it is not included in the report, and there is no name entered in fields B2 and B3, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for field B1 was not obtained at the time of the transaction (and is not available from your records), you can space-fill this field blank. If the ordering client is an <b>individual</b> , field B1 should be space-filled.
*2-4	Full name of ordering client (if client is an individual)  *2 Individual's surname  *3 Individual's given name  4 Individual's other name/initial	X(20)LJ X(15)LJ X(10)LJ	Use for the name of the <b>individual</b> ordering the EFT. Fields B2 and B3 are mandatory. If they are not included in the report, and there is no entry in field B1, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for fields B2 and B3 was not obtained at the time of the transaction (and is not available from your records), you can space-fill these fields. If the ordering client is an <b>entity</b> , fields B2, B3 and B4 should be space-filled.
5-9	Client's full address 5 Street Address 6 City 7 Country 8 Province/State 9 Postal/zip code	X(30)LJ X(25)LJ X(2)LJ X(20)LJ X(9)LJ	Enter the civic address, town or city, country, province or state and postal or zip code of the client ordering the EFT.  These fields require reasonable efforts.
10	Client's telephone number	X(20)LJ	This field requires reasonable efforts.
11	Individual's date of birth	X(8)LJ	Applicable only if the client ordering the EFT is an <b>individual</b> . Date format YYYYMMDD. Must be later than 1880 and cannot be a future date.  This field requires reasonable efforts.  If the client ordering the EFT is an <b>entity</b> , this field should be space-filled.

#### Part B - Information about the client ordering the EFT

**Batch format version 03: EFTI** 

This part is for information about the individual or entity that ordered the EFT to be sent to you. If the individual or entity that ordered the EFT did so on someone else's behalf, you also have to complete Part D.

Field No.	Field Name	Format	Comment
12	Individual's occupation	X(30)LJ	Applicable only if the client ordering the EFT is an <b>individual</b> . This field requires reasonable efforts.  If the client ordering the EFT is an <b>entity</b> , this field should be space-filled.
*13	Client's account number	X(30)LJ	Mandatory (if applicable). If there is no client account number, the field should be space-filled.  Note: Field B13 was different in format version 01.
14	Individual's identifier	X(1)LJ	Applicable only if the client ordering the EFT is an individual.  Enter the appropriate value to show the document used to identify the client who ordered the EFT. If the selections provided do not cover the identifier used, indicate "Other" and provide details in field B14A.  Code Description  A Driver's licence B Birth certificate C Provincial health card D Passport E Other F Record of Landing or Permanent residence card This field requires reasonable efforts. If the client ordering the EFT is an entity, this field should be space-filled.
14A	Other description	X(20)LJ	Provide a description of "Other" as explained above. This field is required if code "E" is entered in field B14.  Note: This field was renumbered from B14E to B14A.
15	ID number	X(20)LJ	Enter the number of the document described in field B14 that was used to identify the client ordering the EFT. This field requires reasonable efforts.
Total characters in Part B: 307		307	Each EFTI must include Part B.

 $Part\ C\ \hbox{- Information about the sender of the EFT (i.e., the individual\ or\ entity\ that\ sends\ the\ payment\ instructions)}$ 

This part is for information about the individual or entity that sent you the payment instructions.

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"C1"
*1	Name of sender (if the sender is an entity)	X(45)LJ	Use for the name of the <b>entity</b> sending the payment instructions. This field is mandatory. If it is not included in the report, and there is no name entered in fields C2 and C3, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for field C1 was not obtained at the time of the transaction (and is not available from your records), you can space-fill this field.  If the sender is an <b>individual</b> , field C1 should be space-filled.
*2-4	Full name of sender (if the sender is an individual) *2 Individual's surname *3 Individual's given name 4 Individual's other name/initial	X(20)LJ X(15)LJ X(10)LJ	Use for the name of the <b>individual</b> sending the payment instructions. Fields C2 and C3 are mandatory. If they are not included in the report, and there is no entry in field C1, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for fields C2 and C3 was not obtained at the time of the transaction (and is not available from your records), you can space-fill these fields. If the sender is an <b>entity</b> , fields C2, C3 and C4 should be space-filled.
*5-9	Full address of sender  *5 Street address  *6 City  *7 Country  *8 Province/State  *9 Postal/zip code	X(30)LJ X(25)LJ X(2)LJ X(20)LJ X(9)LJ	Enter the civic address, town or city, country, province or state and postal or zip code of the sender of the EFT.  These fields are mandatory. If they are not included, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for fields C5 to C9 was not obtained at the time of the transaction (and is not available from your records), you can leave these fields blank (i.e., space-filled).
	Total characters in Part C:	178	Each EFTI must include Part C.

#### **Batch format version 03: EFTI**

### Part D - Information about a third party if the client ordering the EFT is acting on behalf of a third party (if applicable)

This part is for information about any third party on whose behalf the EFT was ordered. If there was no third party related to the EFT order, do not complete this part.

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"D1"
1	Full name of third party (if the	X(45)LJ	If the client ordering the EFT is acting on behalf of a third party,
	third party is an entity)		use this field for the name of the third party <b>entity</b> .
			This field requires reasonable efforts.
			If the third party is an <b>individual</b> , field D1 should be space-
			filled.
2-4	Full name of third party (if the		If the client ordering the EFT is acting on behalf of a third party,
	third party is an individual)	X(20)LJ	use these fields for the name of the third party <b>individual</b> .
	2 Individual's surname	X(15)LJ	These fields require reasonable efforts.
	3 Individual's given name	X(10)LJ	If the third party is an <b>entity</b> , fields D2, D3 and D4 should be
	4 Individual's other name/initial		space-filled.

#### **Batch format version 03: EFTI** Part D - Information about a third party if the client ordering the EFT is acting on behalf of a third party (if applicable)

This part is for information about any third party on whose behalf the EFT was ordered. If there was no third party related to the EFT order, do not complete this part.

Field No.	Field Name	Format	Comment
5-9	Full address of third party		If the client ordering the EFT is acting on behalf of a third party,
	5 Street address	X(30)LJ	enter the civic address, town or city, country, province or state
	6 City	X(25)LJ	and postal or zip code of the third party.
	7 Country	X(2)LJ	These fields require reasonable efforts.
	8 Province/State	X(20)LJ	
	9 Postal/zip code	X(9)LJ	
10	Individual's date of birth	X(8)LJ	Applicable only if the client ordering the EFT is acting on
			behalf of a third party <b>individual</b> .
			Date format YYYYMMDD. Must be later than 1880 and cannot
			be a future date.
			This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.
11	Individual's occupation	X(30)LJ	Applicable only if the client ordering the EFT is acting on
	1	, ,	behalf of a third party <b>individual</b> .
			This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.
12	Individual's identifier	X(1)LJ	If the client ordering the EFT is acting on behalf of a third party
		. ,	individual, enter the appropriate value to show the document
			used to identify the third party.
			If the selections provided do not cover the identifier used,
			indicate "Other" and provide details in field D12A.
			Code Description
			A Driver's licence
			B Birth certificate
			C Provincial health card
			D Passport
			E Other
			F Record of Landing or Permanent residence card
			This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.
12A	Other description	X(20)LJ	Provide a description of "Other" as explained above. This field
	1	, ,	is required if code "E" is entered in field D12.
			Note: This field was renumbered from D12E to D12A.
Total characters in Part D: 237			If the client ordering the EFT was not acting on behalf of a third
			party, do not include Part D in the report for that transaction.

			Batch format version 03: EFTI the individual that receives the payment instructions) receiving the payment instructions.
Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"E1"
<mark>1</mark> *	Reporting entity's identifier number	9(7)RJZ	This is your seven-digit identifier number assigned to you by FINTRAC at enrolment. For more information about this, contact your F2R administrator.  This field is mandatory. If it is invalid, the report will be rejected.  If you need to access this report in F2R, as explained in Section 3.4.2, your name will be displayed in Part E instead of your reporting entity identifier number.
<b>5</b> *	Reporting entity's location number	X(15)LJ	This represents information about the full address of the person or entity receiving the payment instructions. Location numbers are assigned during the FINTRAC enrolment process and maintained by your F2R administrator. For more information about this, contact your F2R administrator.  For deposit taking institutions, this number is the branch portion of your transit number with leading zeroes. For example, the location number for branch 02831 of bank number 0004 would be 02831.  For other types of reporting entities, this number will be created and assigned to you by FINTRAC.  This field is mandatory. If it is invalid, the report will be rejected.  If you need to access this report in F2R, as explained in Section 3.4.2, the full address will be displayed in Part E along with your reporting entity location number.
	Total characters in Part E: 24		Each EFTI must include Part E.

**Batch format version 03: EFTI** 

Part F – Information about the beneficiary client (i.e., individual or entity to whose benefit the payment is made). This part is for information about the individual or entity to whose benefit the payment of the EFT was made (or will be made).

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"F1"
*1	Full name of beneficiary client (if beneficiary client is an entity)	X(45)LJ	Use for the name of the <b>entity</b> to whose benefit the EFT payment is made. Field F1 is mandatory. If it is not included in the report, and there is no name entered in fields F2 and F3, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for field F1 was not obtained at the time of the transaction (and is not available from your records), you can space-fill this field. If the beneficiary client is an <b>individual</b> , field F1 should be space-filled.
*2-4	Full name of beneficiary client (if beneficiary client is an individual)  *2 Individual's surname  *3 Individual's given name  4 Individual's other name/initial	X(20)LJ X(15)LJ X(10)LJ	Use for the name of the <b>individual</b> to whose benefit the EFT payment is made. Fields F2 and F3 are mandatory. If they are not included in the report, and there is no entry in field F1, the report will be rejected. If the 24-hour rule indicator ("1") is used in field A3A and, because of this, information for fields F2 and F3 was not obtained at the time of the transaction (and is not available from your records), you can space-fill these fields. If the beneficiary client is an <b>entity</b> , fields F2, F3 and F4 should be space-filled.
5-9	Beneficiary client's full address 5 Street address 6 City 7 Country 8 Province/State 9 Postal/zip code	X(30)LJ X(25)LJ X(2)LJ X(20)LJ X(9)LJ	Enter the civic address, town or city, country, province or state and postal or zip code of the beneficiary of the EFT payment. These fields require reasonable efforts.
10	Beneficiary client's telephone number	X(20)LJ	This field requires reasonable efforts.
11	Individual's date of birth	X(8)LJ	Applicable only if the beneficiary client is an <b>individual</b> . Format YYYYMMDD. Must be later than 1880 and cannot be a future date.  This field requires reasonable efforts.  If the beneficiary client is an <b>entity</b> , this field should be spacefilled.
12	Individual's occupation	X(30)LJ	Applicable only if the beneficiary client is an <b>individual</b> . This field requires reasonable efforts.  If the beneficiary client is an <b>entity</b> , this field should be spacefilled.
*13	Beneficiary client's account number	X(30)LJ	Mandatory (if applicable). If there is no client account number, the field should be space-filled.  Note: Field F13 was different in format version 01.

Part F – Information about the beneficiary client (i.e., individual or entity to whose benefit the payment is made). This part is for information about the individual or entity to whose benefit the payment of the EFT was made (or will be made).

Field No.	Field Name	Format	Comment
14	Individual's identifier	X(1)LJ	Applicable only if the beneficiary client is an <b>individual</b> . Enter
			the appropriate value to show the document used to identify the
			beneficiary client. If the selections provided do not cover the
			identifier used, indicate "Other" and provide details in field
			F14A.
			Code Description
			A Driver's licence
			B Birth certificate
			C Provincial health card
			D Passport
			E Other
			F Record of Landing or Permanent residence card
			This field requires reasonable efforts.
			If the beneficiary client is an <b>entity</b> , this field should be space-
			filled.
14A	Other description	X(20)LJ	Provide a description of "Other" as explained above. This field
			is required if code "E" is entered in field F14.
			Note: This field was renumbered from F14E to F14A.
	Total characters in Part F:		Each EFTI must include Part F.

# Batch format version 03: EFTI Part G - Information about a third party if the beneficiary client is acting on behalf of a third party (if applicable) This part is for information about any third party on whose behalf the EFT payment is made. If there is no third party related

to the EFT payment, do not complete this part.

Field No.	Field Name	Format	Comment
±	Part ID	X(2)	"G1"
1	Full name of third party (if the	X(45)LJ	If the beneficiary client is acting on behalf of a third party, use
	third party is an entity)		this field for the name of the third party <b>entity</b> .
			This field requires reasonable efforts.
			If the third party is an <b>individual</b> , field G1 should be space-
			filled.
2-4	Full name of third party (if the		If the beneficiary client is acting on behalf of a third party, use
	third party is an individual)		this field for the name of the third party <b>individual</b> .
	2 Individual's surname	X(20)LJ	These fields require reasonable efforts.
	3 Individual's given name	X(15)LJ	If the third party is an <b>entity</b> , fields G2, G3 and G4 should be
	4 Individual's other name/initial	X(10)LJ	space-filled.
5-9	Full address of third party		If the EFT was paid on behalf of a third party, enter the civic
	5 Street address	X(30)LJ	address, town or city, country, province or state and postal or
	6 City	X(25)LJ	zip code of the third party.
	7 Country	X(2)LJ	These fields require reasonable efforts.
	8 Province/State	X(20)LJ	
	9 Postal/zip code	X(9)LJ	
10	Individual's date of birth	X(8)LJ	Applicable only if the EFT was paid on behalf of a third party
			individual.
			Format YYYYMMDD. Must be later than 1880 and cannot be a
			future date.
			This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.

Part G - Information about a third party if the beneficiary client is acting on behalf of a third party (if applicable)
This part is for information about any third party on whose behalf the EFT payment is made. If there is no third party related to the EFT payment, do not complete this part.

Field No.	Field Name	Format	Comment
11	Individual's occupation	X(30)LJ	Applicable only if the EFT was paid on behalf of a third party
			individual. This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.
12	Individual's identifier	X(1)LJ	If the EFT was paid on behalf of a third party <b>individual</b> , enter
			the appropriate value to show the document used to identify the
			third party.
			If the selections provided do not cover the identifier used,
			indicate "Other" and provide details in field G12A.
			Code Description
			A Driver's licence
			B Birth certificate
			C Provincial health card
			D Passport
			E Other
			F Record of Landing or Permanent residence card
			This field requires reasonable efforts.
			If the third party is an <b>entity</b> , this field should be space-filled.
12A	Other description	X(20)LJ	Provide a description of "Other" as explained above. This field
			is required if code "E" is entered in field G12.
			Note: This field was renumbered from G12E to G12A.
	Total characters in Part G:	237	If the beneficiary client is acting on behalf of a third party, do
			not include Part G in the report for that transaction.

#### 5.3.3 EFTO and EFTI Structure Flowchart

