

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

**Standard Batch Reporting Instructions and
Specification**

Version 3.1.2

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. This format has been in effect since May 2006 and updated December 30, 2008. All previous batch formats for EFT reports will no longer be supported.

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.

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)

Part A – Transaction information			Batch format version 03: EFTO
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.
±	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 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 change a report, use the action code “C” and complete the rest of the report. To delete a report, use the action code of “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 the coming into force of March 31, 2003, for this report type . 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 outgoing 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 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 – Transaction information			
This part is for information about when the EFT 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 from 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: 73			Each EFTO must include Part A.

Batch format version 03: EFTO			
Part B - Information about the client ordering the EFT			
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 entity 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 individual , 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 individual 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., space-filled). If the ordering client is an entity , 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.

			Batch format version 03: EFTO
Part B - Information about the client ordering the EFT			
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.			
11	Individual's date of birth	X(8)LJ	Applicable only if the client ordering the EFT is an individual . 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 entity , this field should be space-filled.
12	Individual's occupation	X(30)LJ	Applicable only if the client ordering the EFT is an individual . This field requires reasonable efforts. If the client ordering the EFT is an entity , 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	Each EFTO must include Part B.

Batch format version 03: EFTO			
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”
1*	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 entire batch 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.
5*	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			
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 third party is an entity)	X(45)LJ	If the client ordering the EFT is acting on behalf of a third party, 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 space-filled.
2-4	Full name of third party (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 client ordering the EFT is acting on behalf of a third party, use these fields for the name of the third party individual . These fields require reasonable efforts. If the third party is an entity , fields D2, D3 and D4 should be space-filled.

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 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 client ordering the EFT is acting 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 client ordering the EFT is acting on behalf of a third party individual . 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 entity , 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 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 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 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 D12.
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 is an entity)	X(45)LJ	Use for the name of the entity receiving the EFT payment 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 A3A and, 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 individual , field E1 should be space-filled.
*2-4	Full name of receiver (if the receiver 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 individual receiving the EFT payment instructions. Fields E2 and E3 are mandatory. If they are not included in the report, and there is no entry in field E1, the report will be rejected. If the 24-hour rule indicator (“1”) is used in field A3A 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 entity , fields E2, E3 and E4 should be space-filled.
*5-9	Receiver’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 receiver of the EFT payment instructions. These fields are mandatory. If the 24-hour rule indicator (“1”) is used in field A3A and, because of this, information for fields E5 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 entity 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 individual , 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 individual 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 entity , 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 individual . Format YYYYMMDD. Must be later than 1880 and cannot be a future date. This field requires reasonable efforts. If the beneficiary client is an entity , this field should be space-filled.
12	Individual’s occupation	X(30)LJ	Applicable only if the beneficiary client is an individual . This field requires reasonable efforts. If the beneficiary client is an entity , this field should be space-filled.
*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.

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
14	Individual's identifier	X(1)LJ	<p>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.</p> <p>Code Description</p> <p> A Driver's licence</p> <p> B Birth certificate</p> <p> C Provincial health card</p> <p> D Passport</p> <p> E Other</p> <p> F Record of Landing or Permanent residence card</p> <p>This field requires reasonable efforts.</p> <p>If the beneficiary client is an entity, this field should be space-filled.</p>
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.
Total characters in Part F:		287	Each EFTO must include Part F.

Batch format version 03: EFTO			
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 entity . This field requires reasonable efforts. If the third party is an individual , field G1 should be space-filled.
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 individual . These fields require reasonable efforts. If the third party is an entity , 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.
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)

Part A – Transaction Information			Batch format version 03: EFTI
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.
±	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 change a report, use the action code “C” and complete the rest of the report. To delete 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.

Part A – Transaction Information			Batch format version 03: EFTI
This part is for information about when the EFT 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 to Canadian dollars, including a floating decimal place. This field requires reasonable efforts.
Total characters in Part A: 73			Each EFTI must include Part A.

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
±	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 entity 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 individual , 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 individual 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 entity , 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 individual . 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 entity , this field should be space-filled.

			Batch format version 03: EFTI
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
12	Individual's occupation	X(30)LJ	Applicable only if the client ordering the EFT is an individual . This field requires reasonable efforts. If the client ordering the EFT is an entity , 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.
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	Each EFTI must include Part B.

Batch format version 03: EFTI			
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 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 entity 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 individual , 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 individual 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 entity , 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 third party is an entity)	X(45)LJ	If the client ordering the EFT is acting on behalf of a third party, 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 space-filled.
2-4	Full name of third party (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 client ordering the EFT is acting on behalf of a third party, use these fields for the name of the third party individual . These fields require reasonable efforts. If the third party is an entity , fields D2, D3 and D4 should be 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 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 client ordering the EFT is acting 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 client ordering the EFT is acting on behalf of a third party individual . 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 entity , 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 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 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 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 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			
Part E – Information about the receiver of the EFT (i.e., the individual that receives the payment instructions)			
This part is for information about you, the reporting entity receiving the payment instructions.			
Field No.	Field Name	Format	Comment
±	Part ID	X(2)	“E1”
1*	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.
5*	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 entity 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 individual , 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 individual 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 entity , 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 individual . Format YYYYMMDD. Must be later than 1880 and cannot be a future date. This field requires reasonable efforts. If the beneficiary client is an entity , this field should be space-filled.
12	Individual’s occupation	X(30)LJ	Applicable only if the beneficiary client is an individual . This field requires reasonable efforts. If the beneficiary client is an entity , this field should be space-filled.
*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.

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
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 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 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 entity . This field requires reasonable efforts. If the third party is an individual , field G1 should be space-filled.
2-4	Full name of third party (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 individual . These fields require reasonable efforts. If the third party is an entity , 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.

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
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 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 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.

5.3.3 EFTO and EFTI Structure Flowchart

