Field Name	Start at	Length	Type	Content	Note	Comments	Definitions
Sender Name	1	35	Character	Not Required Leave Blank	1		
Sender Street	36	35	Character	Not Required Leave Blank	1		
Sender City	71	20	Character	Not Required Leave Blank	1		
Sender Province/State	91	20	Character	Not Required Leave Blank	1		
Sender Postal/Zip Code	111	10	Character	Not Required Leave Blank			
Sender Country	121	2	Character	Not Required Leave Blank	1		
Source of Funds	123	70	Character	If known			Specify the origin of the funds, example proceeds from Business/Sale , Income etc.
Name 1	193	35	Character	If known			
Source of Funds Type (Individual/Entity)	228	1	Character	If known/Conditional		Please specify either Individual(I)/Entity(E)	Specify whether the beneficiary is a person (individual) or a business (entity) Individual = I Entity = E
Type of Number	229	3	Numeric	If known		Type of Number (Please select one of them) You can add up to three source of fund info • 001.Account Number • 002.Policy Number • 003.Identifying Number	Specify where the source of funds is from.
Type of Number Value	232	20	Character	If known/Conditional		Please enter the number specific to the option selected Mandatory only if the Type of Number contains a value	Specify the number from the selection above.
Name 2	252	35	Character	If known			
Source of Funds Type	287	1	Character	If known/Conditional		Please specify either Individual(I)/Entity(E)	Specify whether the beneficiary is

(Individual/Entity)						a person (individual) or a business (entity) Individual = I Entity = E
Type of Number	288	3	Numeric	If known	Type of Number (Please select one of them) • 001.Account Number • 002.Policy Number • 003.Identifying Number	Specify where the source of funds is from.
Type of Number Value	291	20	Character	If known/Conditional	Please enter the number specific to the option selected Mandatory only if the Type of Number contains a value	Specify the number from the selection above.
Name 3	311	35	Character	If known		
Source of Funds Type (Individual/Entity)	346	1	Character	If known/Conditional	Please specify either Individual(I)/Entity(E)	Specify whether the beneficiary is a person (individual) or a business (entity) Individual = I Entity = E
Type of Number	347	3	Numeric	If known	Type of Number (Please select one of them) • 001.Account Number • 002.Policy Number • 003.Identifying Number	Specify where the source of funds is from.
Type of Number Value	350	20	Character	If known/Conditional	Please enter the number specific to the option selected Mandatory only if the Type of Number contains a value	Specify the number from the selection above.
Beneficiary Name	370	35	Character	Mandatory		
Beneficiary Street	405	35	Character	Mandatory		
Beneficiary City	440	20	Character	Mandatory		

Beneficiary District	460	20	Character	If known		Note: applicable for Mexico and other foreign countries (except Canada and USA)	Specify the district for the Beneficiary
Beneficiary Sub-Province/Sub-Locality	480	20	Character	If known		Note: applicable for Mexico and other foreign countries (except Canada and USA)	Specifies the sub-province/sub-locality of the beneficiary (applicable for Mexico and other foreign countries (except Canada and USA)
Beneficiary Province/State	500	20	Character	If known/ Mandatory	2		For Canada/ U.S./Mexico 2- character code is preferred
Beneficiary Postal/Zip Code	520	10	Character	Mandatory			
Beneficiary Country	530	2	Character	Mandatory	3		Refer to ISO 3166 2- character Country Code list available on the internet
Beneficiary Account	532	35	Character	Mandatory	4		
Beneficiary ID	567	35	Character	Not Required Leave Blank	17		
Beneficiary Type (Individual/Entity)	602	1	Character	Mandatory		Please specify either Individual(I)/Entity(E)	Specify whether the beneficiary is a person (individual) or a business (entity) Individual = I Entity = E
Beneficiary Account Holder Name 1	603	35	Character	If known		Applicable if individual selected	Specify the name of the account holder(s) (up to three)
Beneficiary Account Holder Name 2	638	35	Character	If known		Applicable if individual selected	Specify the name of the account holder(s) (up to three)
Beneficiary Account Holder Name 3	673	35	Character	If known		Applicable if individual selected	Specify the name of the account holder(s) (up to three)

Beneficiary Account Type	708	3	Numeric	If known		Applicable if individual or entity selected • Account type • 001.Business • 002.Personal • 003.Trust • 004.Other If "Other" is selected, Free format field becomes mandatory.	Specify the type of account for the beneficiary (entity)
Beneficiary Account Type - Other	711	60	Character	If known/Conditional		Applicable if individual or entity selected Mandatory if "Other" is selected as Beneficiary Account Type	
Beneficiary Account Open Date	771	10	Character	If known		Applicable if individual or entity selected MM/DD/YYYY	Specify the date the account was opened
Beneficiary Account Currency	781	3	Character	If known		Applicable if individual or entity selected	Specify the currency of the account you selected for the beneficiary (entity)
Beneficiary Email Address	784	50	Character	If known		Applicable if individual or entity selected	Specify the email address of the beneficiary
Beneficiary Telephone Number	834	20	Character	If known		Applicable if individual or entity selected	Specify the telephone number. Minimum of 12 characters and maximum of 20 characters including dashes Example: 999-999-9999
Beneficiary Extension	854	10	Character	If known		Applicable if individual or entity selected	
Beneficiary Nature of Principal Business	864	60	Character	If known		Applicable if entity selected	Specify the nature of business based on its primary activities
Beneficiary Occupation	924	40	Character	If known		Applicable if individual selected	Specify the line of work for the individual

| Beneficiary Identification Type | 964 | 3 | Numeric | If known | Applicable if individual selected

• Identifier type (person)
• 001. Birth certificate
• 002.Certificate of Indian Status
• 003.Citizenship card
• 004.Credit file
• 005.Driver's licence
• 006.Government issued identification
• 007.Insurance documents
• 008.Passport
• 009.Permanent resident card
• 010.Provincial health card
• 011.Provincial or territorial identity card
• 012.Record of employment
• 013.Record of landing
• 014.Travel visa
• 015.Utility statement
• 016.Other

• Identifier type (entity)
• 001.Annual report
• 002.Articles of association
• 003.Certificate of corporate status
• 004.Certificate of incorporation
• 005.Letter/Notice of assessment
• 006.Partnership agreement
• 007.Other

If "Other" is selected, Free format field becomes mandatory. | |

Field Name	Number	Length	Type	Status		Instructions	Description
Beneficiary Identification Type Other	967	60	Character	If known/Conditional		Applicable if individual selected Mandatory if "Other" is selected as the Identification Type Applicable if individual selected	
Beneficiary Identification Number	1027	30	Character	If known		Applicable if individual selected	Specify the number associated with the identification type
Beneficiary Identification Jurisdiction of Issue (Country)	1057	2	Character	If known		Applicable if individual selected Use 2-character country code (SWIFT ISO)	Specify the country using 2-character country code (refer to ISO 3166 Country Code list available on the internet))
Beneficiary Identification Jurisdiction of Issue (Province/State)	1059	20	Character	If known		Applicable if individual selected For payments to Canada and the U.S., a 2-character (SWIFT ISO code) Province/State code must be entered. For payments to countries other than Canada and the U.S., a province/state name may be entered (to a maximum of 20 characters). Padding with spaces may be required.	For jurisdictions related to Canada, the U.S. and Mexico, a 2-character (ISO code) Province/State code must be entered. For any other countries, a province/state name may be entered.
Beneficiary Username	1079	35	Character	If known		Applicable if individual or entity selected	Specify the individual's online handle (that receives payment)
Beneficiary Preferred Name	1114	35	Character	If known		Applicable if individual selected	Specify the preferred Name of the individual
Beneficiary Date of Birth	1149	10	Character	If known		Applicable if individual selected MM/DD/YYYY	Date of birth of the individual
Beneficiary Country of Residence	1159	2	Character	If known		Applicable if individual selected Use 2-character country code (SWIFT ISO)	Specify the country using 2-character country code (refer to ISO 3166 Country Code list available on the internet)
Beneficiary Employer Name	1161	35	Character	If known		Applicable if individual selected	Specify the name of the

						employer of the individual
Beneficiary Authorized Signor Name 1	1196	35	Character	If known		Applicable if entity selected You can add up to 3 Authorized Signer Name	Specify up to three individuals who would be considered signors on behalf of the entity
Beneficiary Authorized Signor Name 2	1231	35	Character	If known		Applicable if entity selected	Specify up to three individuals who would be considered signors on behalf of the entity
Beneficiary Authorized Signor Name 3	1266	35	Character	If known		Applicable if entity selected	Specify up to three individuals who would be considered signors on behalf of the entity
Entity's Information	1301	3	Numeric	If known		Applicable if entity selected • Entity's Information: • 001 Registered • 002 Incorporated • 003 Registered & Incorporated • 004 Not Available Based on the option selected the fields will be mandatory Ex: if Registered is selected then Registration number, Province and Country is mandatory These fields are applicable only if Beneficiary is an Entity	
Registration Number	1304	30	Character	If known		Applicable if entity selected	If the entity is Registered, specify the registration number.
Registration Jurisdiction of Issue (Country)	1334	2	Character	If known		Applicable if entity selected Use 2-character country code (SWIFT ISO)	Specify the country using 2-character country code (refer to ISO 3166 Country

						Code list available on the internet)
Registration Jurisdiction of Issue (Province/State)	1336	20	Character	If known		Applicable if entity selected For payments to Canada and the U.S. and Mexico, a 2-character (SWIFT ISO code) Province/State code must be entered. For payments to countries other than Canada and the U.S., a province/state name may be entered (to a maximum of 20 characters). Padding with spaces may be required.	For registrations related to Canada, the U.S. and Mexico, a 2-character (ISO code) Province/State code must be entered. For any other countries, a province/state name may be entered.
Incorporation Number	1356	30	Character	If known		Applicable if entity selected	If the entity is Incorporated, specify the incorporation number
Incorporation Jurisdiction of Issue (Country)	1386	2	Character	If known		Applicable if entity selected Use 2-character country code (SWIFT ISO)	Specify the country using 2-character country code (refer to ISO 3166 Country Code list available on the internet)
Incorporation Jurisdiction of Issue (Province/State)	1388	20	Character	If known		Applicable if entity selected For payments to Canada and the U.S. and Mexico, a 2-character (SWIFT ISO code) Province/State code must be entered. For payments to countries other than Canada and the U.S., a province/state name may be entered (to a maximum of 20 characters). Padding with spaces may be required.	For jurisdictions related to Canada, the U.S. and Mexico, a 2-character (ISO code) Province/State code must be entered. For any other countries, a province/state name may be entered.
Beneficiary Bank Name	1408	35	Character	Mandatory			
Beneficiary Bank Street	1443	35	Character	Mandatory			
Beneficiary Bank City	1478	20	Character	Mandatory			
Beneficiary Bank District	1498	20	Character	If known		Note: applicable for Mexico and other foreign countries (except Canada and USA)	Specify the district for the Beneficiary Bank

						Note	Comments
Beneficiary Bank Sub-Province/Sub-Locality	1518	20	Character	If known		Note: applicable for Mexico and other foreign countries (except Canada and USA)	Specifies the sub-province/sub-locality of the Beneficiary Bank
Beneficiary Bank Province/State	1538	20	Character	If known/Mandatory	2		For Canada/ U.S./Mexico 2- character code is preferred
Beneficiary Bank Postal/Zip Code	1558	10	Character	Mandatory			
Beneficiary Bank Country	1568	2	Character	Mandatory	3		Refer to ISO 3166 2-character Country Code list available on the internet
Beneficiary Bank Id	1570	35	Character	Mandatory	18		
Your Reference	1605	35	Character	If known/Mandatory	5		
Payment Due Date	1640	10	Character	Mandatory	6		
Payment Currency	1650	3	Character	Mandatory			
Payment Amount	1653	12	Numeric	Mandatory	7		
Contract Type	1665	1	Character	Mandatory	8		
Contract Number	1666	7	Numeric	If known/Mandatory	9		
Exchange Rate	1673	8	Numeric	If known/Mandatory	10		
Settlement Currency	1681	3	Character	Mandatory			
Settlement Account	1684	13	Character	Mandatory	11		
Beneficiary Instructions	1697	70	Character	If known	13		
TD Instructions	1767	70	Character	Not required	12		
Intermediary Bank Name	1837	35	Character	If known/ Mandatory	14		
Intermediary Bank Street	1872	35	Character	If known	14		
Intermediary Bank City	1907	20	Character	If known/Mandatory	14		
Intermediary Bank District	1927	20	Character	If known		Note: applicable for Mexico and other foreign countries (except Canada and USA)	Specify the district for the Intermediary Bank

Intermediary Bank Sub-Province/Sub-Locality	1947	20	Character	If known		Note: applicable for Mexico and other foreign countries (except Canada and USA)	Specifies the sub-province/sub-locality of the Intermediary Bank
Intermediary Bank Prov/State	1967	20	Character	If known/Mandatory	2, 14		For Canada/U.S./Mexico 2- character code is preferred
Intermediary Bank Postal/Zip Code	1987	10	Character	If known/Mandatory	2, 14		
Intermediary Bank Country	1997	2	Character	If known/Mandatory	3, 14		Refer to ISO 3166 2-character Country Code list available on the internet
Intermediary Bank Id	1999	35	Character	If known	14		
Payee Type (Payment Transfer Type)	2034	1	Character	Mandatory	15		
Payment Destination	2035	1	Character	Mandatory	16		
Reason for Payment	2036	70	Character	If known	19		

The following characters are not permitted: !'~@#$%^&*[];<>"|,`/-?:().+