Archdiocese of Toronto - Mission Cooperative Program Wire Transfer Information Request – specific to INDIA only

Diocese/Religious Order Name:	
Signature:	Date:
(where applicable) in order for your D Pastoral Mission Fund and Mission Co	cise, please provide the following information in its entirety plocese/Religious Order to receive funds via wire transfer from the poperative Program. All funds sent must be to the
Diocesan/Religious Order account. Pl	ease make sure to fill-out the FCRA Compliancy information.
Please return this form as soon as pos	sible to: mcp@archtoronto.org
MAIN BANK Identification	
Bank Name	
Bank Address	
Swift Code	
Diocesan/Religious Order Account Number	
Other Number (if applicable - IBAN, CIF, Bank Sort Code)	
Mandatory Information: FCRA Registration Number	
Account Type Choose one - Account will accept and convert to local currency	□ USD □ EURO □ CANADIAN DOLLAR
DIOCESAN / RELIGIOUS ORDE	R Identification
Diocese or Religious Order Account Name	
Diocese or Religious Order Account Address	
INTERMEDIARY BANK Identif	ication (if applicable)
Bank Name	
Bank Address	
Swift Code	
Account Number	
Other Number (if applicable - IBAN, CIF, Bank Sort Code)	
Account Type (specify USD, EUROS, ETC.)	