| OFAC Review Checklist | |
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| Project Country | |
| | |
| Destination of money or goods | s |
| Name of the organization or individual: | |
| If an organization, name of the representative: | |
| Address: | |
| Email address: | |
| Website address (if available): | |
| US dollar amount of funds or list of goods | |
| | |
| Is this part of a larger project | ? |
| | |
| Information for money transf | er (do not provide routing numbers unless asked) |
| Name of the bank/financial institution: | |
| Address: | |
| Bank account information (do not provide account numbers unless asked) | |
| Name of the account: | |
| Name of the signatories: | |
| Purpose of the payment/gifts | |
| | |
| | |
| Project partners in the project country | |
| Name of the organization or individual: | |
| If an organization, name of the representative: | |
| Address: | |
| Phone number: | |
| Email address: | |
| Website address (if available): | |
| Vendors in the project country where project supplies will be purchased from | |
| Name of the organization or individual: | |
| If an organization, name of the representative: | |
| Address: | |
| Phone number: | |
| Email address: | |
| Website address (if available): | |
| Steps in the trail of money/goods to destination- Please designate how the money will be transferred | |
| (electronically, check, in what | |
| From TRF to: | (enter organization/individual) |
| From district or club to: | (enter organization/individual) |
| Then to: | (enter organization/individual if applicable) |
| Then to: | (enter organization/individual if applicable) |
| Will the above be handled in installments? | |
| | |