

DECLARATION OF SOURCE OF FUNDS

CIF NUMBER #:

BRANCH:

DATE:

<i>Mr./Miss/Mrs./Dr.</i>	<i>Surname</i>	<i>First Name &/or Middle Name</i>	<i>Customer since</i>	<i>Birth date</i>
<i>Trade Name / Alias</i>			<i>Occupation/Profession</i> <small>(If retired specify)</small>	<i>Resident / Non-Resident</i>
<i>Permanent Address (Street)</i>		<i>Post Office Box Number</i>	<i>Phone Number (Business)</i>	<i>Citizenship (Country)</i>
<i>City</i>		<i>Country</i>	<i>Phone Number (Resident)</i>	<i>Cellular/Fax Number</i>

IDENTIFICATION (Applicant) (Two for non-nationals)

<i>1st ID Type</i>	<i>Number</i>	<i>Issuer</i>	<i>Date of Issue</i>	<i>Expiration Date</i>
<i>2nd ID Type</i>	<i>Number</i>	<i>Issuer</i>	<i>Date of Issue</i>	<i>Expiration Date</i>

PERSON CONDUCTING TRANSACTION (Other Than Client)

<i>NAME (Surname/ First/ Middle)</i>	<i>BIRTHDATE (DD/MM/YY)</i>	<i>PHONE NUMBER (Business)</i>
<i>ADDRESS (Street and City)</i>	<i>P.O. BOX NO.</i>	<i>PHONE NUMBER (Residence)</i>
<i>COUNTRY / POSTAL CODE</i>	<i>BUSINESS/OCCUPATION/EMPLOYER</i>	RESIDENT <input type="checkbox"/> NON-RESIDENT <input type="checkbox"/>
<i>IDENTIFICATION (Number, Place, Date of Issue)</i>	<i>IDENTIFICATION (Number, Place, Date of Issue)</i>	

ACCOUNT/TRANSACTION INFORMATION

<i>A/C HELD? YES <input type="checkbox"/> NO <input type="checkbox"/></i>	<i>A/C TYPE: DDA <input type="checkbox"/> SAV <input type="checkbox"/> CD <input type="checkbox"/> LOAN <input type="checkbox"/> CREDIT CARD <input type="checkbox"/></i>		
<i>ACCOUNT NUMBER:</i>	<i>CURRENCY TYPE:</i>	<i>TRANSACTION TOTAL:</i>	<i>EC EQUIVALENT:</i>
<i>TRANSACTION TYPE: CASH DEPOSIT <input type="checkbox"/> CHEQUE DEPOSIT <input type="checkbox"/> CASH & CHEQUE DEPOSIT <input type="checkbox"/> CHQ CASHED <input type="checkbox"/> CASH EXCHANGE <input type="checkbox"/> FOREIGN MONIES BOUGHT <input type="checkbox"/> FOREIGN MONIES SOLD <input type="checkbox"/> SWIFT INCOMING <input type="checkbox"/> SWIFT OUTGOING <input type="checkbox"/> TRAVELLERS CHQS PURCHASED <input type="checkbox"/> WITHDRAWAL <input type="checkbox"/> DRAFT PURCHASED <input type="checkbox"/> OTHER <input type="checkbox"/></i>			

DECLARATION: I HEREBY DECLARE THE SOURCE OF FUNDS FOR THIS TRANSACTION IS:

Pursuant to the provisions of the Proceeds of Crime (Anti-Money Laundering and Terrorism Financing) Guidelines issued by the Anti-Money Laundering and Combating Terrorism Financing Commission, it is the policy of this institution that it must be satisfied as to the source of funds prior to accepting deposits, or funds for transfer, or the purchase of any currency or instrument. The source of funds over US\$10,000 or its equivalent must also be declared to this institution.

PERSON CONDUCTING TRANSACTION (OTHER THAN THE CLIENT) _____ CLIENT'S SIGNATURE _____ DATE _____

BRANCH USE ONLY (Please use this section to record additional details or to provide clarity on the transaction.)

Transaction accepted Customer refused to sign Transaction declined Unacceptable explanation
Customer uncooperative Other

COMMENTS:

Is Stated source reasonable, given the Customer's Occupation and or size of business etc.? Yes/No What was done to verify source? If amount under established reporting limits, give reason for reporting.

Taken by: _____ *Processed by:* _____ *Op #:* _____
BANK OFFICER **TELLER**

Authorised by: _____ *Reviewed by:* _____
SUPERVISOR **MANAGER**