

**Report of International Transfer of
Currency Valued**

**\$ 10,000 U.S.
or more**



Complete this form and give to a
CUSTOMS OFFICER
at an **ANTIGUA AND BARBUDA
PORT/AIRPORT/POINT**
of arrival or departure

Transferring cash or negotiable financial instruments into or out of Antigua and Barbuda

This form should be completed by a person who transfers or carries Eastern Caribbean and/or foreign currency in cash or negotiable financial instruments into or out of Antigua and Barbuda and the currency involved is of a total value of **\$10,000 U.S. or more or its equivalent in other currency**. Cash means the coin and paper money of the Eastern Caribbean currency or any other currency. Negotiable instruments include travellers cheques and other monetary instruments. Reporting of transfers of cash or negotiable financial instruments valued at \$10,000 U.S. or more, or equivalent in other currency into or out of Antigua and Barbuda is required by law under Section 18 of the Money Laundering (Prevention) Act 1996 as amended.

The Money Laundering (Prevention) Act 1996

The *Money Laundering (Prevention) Act [No. 9 of 1996] as amended* assists in the detection of serious criminal activity, including money laundering from drug trafficking and organised crime.

Penalties

There are penalties for failure to make a report of a customs officer assigned for duty at the point of arrival or departure or supply full and correct information. The penalties include:

- imprisonment for a period not more than two years; and/or
- a fine of up to fifty thousand dollars; and
- the confiscation of the cash or negotiable instruments being transported.

Further information or assistance

The office of the Supervisory Authority is at the Headquarters of the Office of National Drug and Money Laundering Control Policy (ONDCP). Staff of the ONDCP financial intelligence unit can assist with any inquiries.

Telephone **(268) 562-3265 or (268) 562-3255**

CUSTOMS USE ONLY	
Verified (name, DOB, Passport) Yes <input type="checkbox"/> No <input type="checkbox"/>	
Verified currency Yes <input type="checkbox"/> No <input type="checkbox"/>	
Officer	<input style="width: 100%;" type="text"/>
Port	<input style="width: 100%;" type="text"/>
Customs Reg. No.	<input style="width: 100%;" type="text"/>
Date	<input style="width: 100%;" type="text"/>
SUPERVISORY AUTHORITY USE ONLY	
ONDCP Report No.	<input style="width: 100%;" type="text"/>

Continued overleaf

PLEASE PRINT

PART A

1. Are you carrying or transferring currency valued at \$10,000 or more United States dollars INTO Antigua and Barbuda?

OUT OF Antigua and Barbuda?

PART B Details of the person carrying or transferring the currency into or out of Antigua and Barbuda

2. Given names

Surname

3. Date of Birth

/	/
DAY	MONTH YEAR

4. Permanent address in home country

City	
State	Post code
Country	

5. Are you a resident of Antigua and Barbuda?

Yes No

6. Address while in Antigua and Barbuda?

City/Town

7. Occupation or business activity

8. Number of valid passports held by you?

9. Details of passports

PASSPORT NO.	COUNTRY OF ISSUE

10. Port of arrival or departure

11. Date of arrival or departure

PART C Details of currency being carried or transferred

12.

Country of issue Amount of EC or foreign currency Approximate U.S. rate of exchange Value in U.S. dollars

	Country of issue	Amount of EC or foreign currency	Approximate U.S. rate of exchange	Value in U.S. dollars
A	Eastern Caribbean			
B	United States			
C				
D				

Total sum in U.S. \$ = (add lines A,B,C and D)

13. What city and country is the currency being imported from or taken to?

City/Town
Country

14. Are you traveling in a group? Yes No

15. Is any member of the group transporting currency on your behalf not accounted for in item 12 above? Yes No

16. If so, state the person's name

17. How much currency is the person carrying?

18. Are you carrying or transferring the currency: wholly or partly on behalf of another person, business or organisation? Go to Part D

wholly on your own behalf? Go straight to Part E

PART D (a) Details of the person, business or organisation on whose behalf currency is being transferred

19. Give name of person or organisation

20. Address

City	
State	Post code
Country	

21. Occupation or nature of business

(b) Details of the person, business or organisation to whom currency is being transferred

22. Give name of person or organisation.

23. Address

City	
State	Post code
Country	

24. Occupation or business activity

PART E Declaration and Signature

I declare that the above information is correct.

Date:

/	/
DAY	MONTH YEAR

Signature
