

Suspicious Activity Report

COMPLETE ENTIRE REPORT (see Instructions)

Please complete this form in **black ink** and print in **CAPITAL LETTERS**Mark appropriate answer boxes with a check $(\sqrt{})$

Instructions on how to prepare a suspicious activity or transaction report using this form are enclosed with the form or can be obtained from the ONDCP.

CONFIDENTIAL

This Report is a confidential document and must be treated as such.

Complete ALL items on this form, as soon as possible AFTER the transaction or attempted transaction or activity that is the subject of this report. Items that are not applicable should be left blank.

Reporting of suspicious transactions by financial institutions is required by law under Section 13 of the Money Laundering (Prevention) Act 1996 as amended ("MLPA") and regulation 6(1) of the Money Laundering (Prevention) Regulations 2007. A list of all financial institutions required to file suspicious transaction reports ("STR") is found in the First Schedule to the MI PA.

Tipping off: Financial institutions (including employees, staff, directors, owners or other authorized representatives) shall not notify any person that this SAR has been filed and information relating thereto furnished to the Supervisory Authority. Criminal offence is committed contrary to section 13(5) of the MLPA for failure to comply with this obligation.

Send the completed form to:
THE SUPERVISORY AUTHORITY
ONDCP Headquarters
P.O. Box W 827, Camp Blizard, Antigua
Tel: (268) 562-3255 email: s

email: supervisoryauthority@ondcp.gov.ag

Privacy Statement

The provisions of Section 13 of the MLPA and Regulations 6 of the MLPR are designed to help detect money laundering and uncover transactions invovling the proceeds of crime. Information reported to the Supervisory Authority at the ONDCP is kept confidential. However, the Supervisory Authority is legally authorised to share the information with another law enforcement authority where the disclosure is essential to the detection, investigation or prosecution of an offence. Financial institutions, are protected by Section 13(4)of the MLPA from criminal, civil or administrative liability for complying with the legal requirement to file reports of transactions that constitute or could be related to money laundering.

Penalties exist for failure to lodge or supply full and correct information as required.

For assistance please call the Senior Financial Intelligence Officer of the ONDCP at (268) 562-3255

Timing of Report

Reporting is required by Section 13(2) of the MLPA to be done promptly. Reports of suspicious transactions or activities must be made as soon as practicable, but no later than 30 days after the suspicious activity/transaction is discovered.

Please note the time when the suspicious transaction/activity occurred, the time when you start to fill out this form and the time when you complete this form. You may be asked about how long it took to prepare and file this report.

A SAR must be in writing. Contact with law enforcement authorities does not eliminate or satisfy the section 13(2) requirement of the MLPA to make a SAR.

1 Check the box if this report is made to correct or update a prior report. Where a correction is being filed, the entire form must be completed again and changes made in the appropriate item and explained in Part D.

PART A - IDENTITY OF SUBJECT(S) CONDUCTING THE SUSPICIOUS ACTIVITY OR TRANSACTION

- 2 Subject information unavailable
- 3 Multiple subjects involved

SUBJECT INFORMATION

- 4 Name of individual or entity
- (a) Surname or name of entity
- (b) First name:
- (c) Middle name:
- (d) alias (if any):
- (e) trading as:
- 5 Address
- (a) Street
- (b) City:
- (c) State/province:
- (d) Postcode:
- (e) Country:
- 6 Date of birth (dd/mm/yyyy)
- 7 Country of registration
- 8 Occupation/Type of business
- 9 (a) Telephone number (home):
 - (b) Telephone number (business):
- **10** 1) Form of identity verification No.

Authority that issued document

Form of identity verification No.

Authority that issued document

- **11** Subject's relationship to the reporting financial institution
 - (a) Customer
- (g) Broker
- (b) Accountant
- (h) Director

(c) Agent

- (i) Employee
- (d) Appraiser
- (j) Officer
- (e) Attorney
- (k) Shareholder
- (f) Borrower
- (I) Other
- **12** Is the subject working with or for the institution?
 - (a) Yes
 - No

Subject is

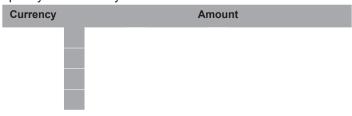
- (b) still employed
- (c) suspended
- (d) terminated
- (e) resigned
- **13** Date of suspension, termination or resignation:

PART B - DETAILS OF THE TRANSACTION OR ACTIVITY

- **14** Type of financial services involved in suspicious transaction
- **15** Date or date range of suspicious transaction or activity From to
- **16** E.C. Dollar amount of transaction(s)

E C D \$

17 If foreign currency is involved in the transaction(s) specify the currency and the amount



- 18 Type and quantity of instrument(s) involved
- (1)
- (2)
- (3)
- 19 Transaction number(s)
- 20 Accounts affected:
- (1) Account number:
- (2) Account number:
- (3) Account number:
- (4) Account number:
- 21 If account closed, date closed
- (1) date
- (2) date
- (3) date
- (4) date

PART C - SUMMARY CHARACTERIZATION OF SUSPICIOUS ACTIVITY

- **22** Category of Suspicious Activity. Check the box(es) which best identify the suspicious activity: (A numbered list of typologies is attached to the end of the instructions for preparing this form.)
 - (a) Structuring (or layering)
 - (b) Money laundering
 - (c) Cheque Fraud
 - (d) Computer Intrusion
 - (e) Counterfeit Cheque
 - (f) Counterfeit Instrument
 - (g) Credit Card Fraud
 - (h) Debit Card Fraud
 - (i) Embezzlement
 - (j) False invoicing
 - (k) Identity Theft
 - (I) Investment Fraud
 - (m) Mysterious Disappearance
 - (n) Refusal/failure to complete CDD requirements
 - (o) Refusal/failure to update CDD information
 - (p) Terrorist Financing
 - (q) Wire Transfer Fraud
 - (r) The suspicious activity resembles typology No.
 - (s) Other:
- 23 Character of suspicious activity
 - (a) unusual transaction
 - (b) complex transaction
 - (c) large transaction
 - (d) unusual pattern of transactions with no apparent economic purpose
 - (e) insignificant but periodic transactions with no apparent economic purpose
 - (f) unusual use of monetary instrument
 - (g)other:

PART D - DESCRIPTION AND EXPLANATION OF SUSPICIOUS TRANSACTION /ACTIVITY

24 Give the reasons why you consider the transaction or activity reported in Part B to be suspicious. (If there is insufficient space, continue the narrative on a separate sheet of paper.)

This section of the report is **critical**. The care with which it is written may make the difference in whether the described conduct and its possible criminal nature are clearly understood. Provide below a chronological and complete account of the activity, including what is unusual, irregular or suspicious about the transaction, using the following checklist as you prepare your account.

- a. Describe the conduct that raised suspicion, why it was suspicious and the date(s) discovered.
- b. Explain whether the transaction(s) was completed or only attempted.
- c. **Describe** supporting documentation (e.g., transaction records, new account information, correspondence.) **Retain the originals.**
- d. **Explain** who benefited, financially or otherwise, from the transaction, how much, and how.
- e. Retain any admission or explanation of the transaction provided by the suspect or any other person and indicate to whom and when it was given.
- f. Retain any evidence of an attempt to deceive the financial institution as to the actual nature of the transaction or amount of the transaction the subject sought to carry out.
- g. Indicate where a possible violation of law took place, if possible.
- Indicate whether the activity is an isolated incident or relates to another transaction(s). Note whether this is an updated report and if so, provide the date of the original SAR regarding this activity.
- Indicate whether currency and/or monetary instruments were involved. If so, provide the amount and/or description of the instrument (for example, bank draft, letter of credit, money order, stocks, bonds, traveler's cheques, wire transfers sent or received, cash, etc.) and

- country of origin.
- Describe any funds transfers, including any in or out identification numbers, parties involved, dates, amounts, and financial institutions involved.
- k. Indicate for a foreign national any available information on subject's passport(s), and/or identification card(s). Include date, country, city of issue, issuing authority, and nationality.
- Describe subject(s) position if employed by or affiliated with the financial institution.
- m. Indicate the type of institution filing this report, if this is not clear.
- n. Indicate if a law enforcement agency other than the ONDCP has been contacted, list the name of the agency and the name of any person contacted, their title, their telephone number, and when they were contacted.
- Recommend any further action that you consider might assist law enforcement authorities
- Indicate whether any information has been excluded from this report; if so, state reasons.
- q. Indicate any account number(s) that may be involved or affected.
- r. If correcting or amending a prior report, complete the form in its entirety and note the items that contain the changes.

Take Note: SARs are confidential and must be handled accordingly.

PART E - DETAILS OF REPORTING FINANCIAL INSTITUTION 26 Type of financial institution reporting 27 Name of financial institution 28 Address of financial institution Street City State/province Postcode Country email 29 Location of branch where transaction or activity or the attempt took place (if different from item 26 above) Street City State/province Postcode Country Check box if the suspicious activity took place in 30

more than one branch or location and indicate this informa-

31 Details of Compliance Officer or authorised person who

PART F - STATEMENT OF REPORTING FINANCIAL INSTITUTION

32 This statement is made by the financial institution named in Part E pursuant to the requirement of Section 13(2) of the MLPA to report suspicious transactions and is based on the information provided in Part D.

I declare the information contained in this report to be correct to the best of my knowledge, information and belief.

Date report prepared (dd/mm/yyyy):

SIGN HERE

Signature of Compliance Officer or authorised person

UFF	IUIAI	L US	E UI	NLY

Report number

can be contacted for assistance in this matter

Case Officer

tion in Part D.

Office Address

Telephone

Fax email

Name Position

Comments