

Suspicious Transaction Report <i>(Complete all parts that apply—see instructions)</i>		AMLC Form No. _____	
		Date of report ____/____/____ (MM)/(DD)/(YYYY)	
1 Check all box(es) that apply:			
a <input type="checkbox"/> Amends report dated _____ (MM/DD/YYYY)		b <input type="checkbox"/> Individual person	
c <input type="checkbox"/> Multiple persons		d <input type="checkbox"/> Corporation	
PART I Reporting Covered Institution Information			
2 Name of covered institution <i>(if a branch, specify location)</i>		3 Nature of business	
4 If institution has closed, date closed ____/____/____ (MM)/(DD)/(YYYY)		5 Supervising Authority <input type="checkbox"/> BSP <input type="checkbox"/> SEC <input type="checkbox"/> IC	
6 Address _____ <i>unit no. building no. & street barangay city province zip code</i>			
7 Name of contact person		8 Telephone nos.	
Last _____ First _____ M.I. _____		9 Fax nos.	
Title/position _____			
Part II Person(s) Involved in Transaction(s)			
Section A Individual Person			
10 Name			
Last _____ First _____ M.I. _____			
11 Home address _____ <i>unit no. building no. & street barangay city province zip code</i>			
12 Home tel. no.	13 <input type="checkbox"/> SSS <input type="checkbox"/> GSIS <input type="checkbox"/> TIN no.	14 Date of birth ____/____/____ (MM)/(DD)/(YYYY)	15 Place of birth (town, city, province)
16 Home fax no.			
17 Business name	18 Business tel. no.	19 Business fax no.	
20 Address _____ <i>unit no. building no. & street barangay city province zip code</i>			
<i>If transaction involves the opening of an account, please complete this section.</i>			
21 Transaction was entered into by the client in person <input type="checkbox"/> yes <input type="checkbox"/> no			

- d client is not properly identified
- e amount of transaction is not commensurate with client's business or financial capacity
- f no underlying legal or trade obligation, purpose, origin or economic justification
- g transaction is unusually complex
- h transaction has no credible purpose or origin, underlying trade obligation or contract
- i cash deposit or investment having no credible purpose or origin, underlying trade obligation or contract

42 Basis of suspicion

a Predicate crime

- Kidnapping for ransom
- Dangerous Drugs Act (Secs. 3,4,5,7,8,,9 of Art. 2)
- Anti-Graft and Corrupt Practices Act (RA 3019, Secs. 3 (b,c,e,g,h, i)
- Plunder (RA 7080)
- Robbery and extortion (Revised Penal Code, Arts. 294, 295, 296, 299, 300, 301, 302)
- Jueteng and masiao (Illegal Gambling PD 1602)
- Piracy in the high seas
- Qualified theft (RPC Art. 310)
- Swindling (Estafa RPC Art. 315)
- Smuggling (RA 455 and 1937)
- Violations of the E-Commerce (RA 8792)
- Hijacking (RA 6235)
- Destructive arson and murder, those perpetrated by terrorists against non-combatant persons and similar targets
- Fraudulent practices and violations of SRC (RA 8799)
- Felonies or offenses of similar nature punishable under penal laws of other countries, specify _____

b Others _____

Single Transaction

43 Amount involved _____

- | | | | |
|--|-----|-------|-----|
| a <input type="checkbox"/> Philippine currency | Php | _____ | .00 |
| b <input type="checkbox"/> Foreign currency | | _____ | .00 |
| c <input type="checkbox"/> Cashier's check(s) | | _____ | .00 |
| d <input type="checkbox"/> Money order(s) | | _____ | .00 |
| e <input type="checkbox"/> Bank draft(s) | | _____ | .00 |
| f <input type="checkbox"/> Traveler's checks | | _____ | .00 |
| g <input type="checkbox"/> Securities | | _____ | .00 |
| h <input type="checkbox"/> Others | | _____ | |

44 Type of transaction

DSP

- a Deposit
- b Withdrawal
- c Fund transfer
- d Remittance
- e Bills payment
- f Loan payment

IC

- i Policy purchase
- j Policy sale
- k Policy settlement
- l Policy cancellation

m Others

(please specify) _____

SEC

- g Securities purchase
- h Securities sale

45 Branch

46 Account number

47 Date of transaction

____/____/____
(MM)/(DD)/(YYYY)

Series or combination of transactions

If the transaction involves a series or combination of transactions, accomplish the form contained in Annex "B" for each of the transactions.

48 Number of transactions _____

49 Number of attached forms of Annex "B" _____

PART IV Persons Preparing Report

50 Person who dealt directly with the customer in the transaction or who made initial internal report

Last _____ First _____ M.I. _____

Title/position _____ Signature _____

51 Compliance officer or his equivalent

Last _____ First _____ M.I. _____

Title/position _____ Signature _____

52 Senior officer (with rank not lower than senior vice president)

Last _____ First _____ M.I. _____

Title/position _____ Signature _____

53 Copy of authorization from covered institution of persons making, preparing and approving this report

a Attached b Not Attached. Reasons _____

This Section is to be filled up by personnel of AMLC, BSP, SEC or IC

54 Name of person receiving this report (in AMLC, BSP, SEC or IC)

Last _____ First _____ M.I. _____

Title/position _____ Signature _____

55 Agency

AMLC BSP
 SEC IC

56 Contact number

57 Date report received

____/____/____
(MM)/(DD)/(YYYY)

58 Place report received

59 Enumeration of attached documents

a Copies of documents supporting Customer Identification: Enumerate
Number of documents attached: _____

b Copies of documents evidencing the suspicious transaction: Enumerate
Number of documents attached: _____

c Original signed authorization from Covered Institution to make, prepare and file of this report
Number of documents attached: _____

PART V: Suspicious Transaction Information Explanation/Description

This section of the report is critical. The care with which it is written may make the difference in whether or not the described conduct and its possible criminal nature are clearly understood. **If necessary, continue the narrative on a duplicate of this page.** Guidelines for the preparation of your response are provided in Annex "C" hereof.

Explanation/description of known or suspected violation of law or suspicious transaction.

Description of the Suspicious Transactions and Chronology of Events Leading to the Suspicion Using the Guidelines Enumerated Above

ANNEX "A"

Form for Information on Individuals

Section B Multiple Persons			
Individual Information			
1 Name			
Last		First	M.I.
2 Business name	3 <input type="checkbox"/> SSS <input type="checkbox"/> GSIS <input type="checkbox"/> TIN no.		4 Date of birth ____/____/____ (MM)/(DD)/(YYYY)
	5 Tel. nos.	6 Fax nos.	7 Place of birth (town, city, province)
8 Address			9 Telephone nos.
unit no. building no. and street barangay			10 Fax nos.
city province zip code			
If transaction involves the opening of an account, please complete this section.			
11 The account was opened by the client in person <input type="checkbox"/> yes <input type="checkbox"/> no			
12 Document to verify identity			
a <input type="checkbox"/> Driver's license		b <input type="checkbox"/> Alien registration	c <input type="checkbox"/> Passport
d <input type="checkbox"/> Company ID		e <input type="checkbox"/> Others _____	
13 Issuing authority _____		14 Number _____	
15 Date issued _____ (MM)/(DD)/(YYYY)		16 Date of expiry _____ (MM)/(DD)/(YYYY)	
17 Relationship to Covered Institution:			
a <input type="checkbox"/> Accountant		b <input type="checkbox"/> Attorney	
e <input type="checkbox"/> Agent		f <input type="checkbox"/> Borrower	
i <input type="checkbox"/> Appraiser		j <input type="checkbox"/> Broker	
m <input type="checkbox"/> Other		c <input type="checkbox"/> Customer	
		g <input type="checkbox"/> Director	
		k <input type="checkbox"/> Employee	
		d <input type="checkbox"/> Officer	
		h <input type="checkbox"/> Shareholder	
		l <input type="checkbox"/> Depositor	
18 Is the relationship an employment relationship? a <input type="checkbox"/> Yes b <input type="checkbox"/> No		19 Date of suspension, termination, resignation ____/____/____ (MM)/(DD)/(YYYY)	
If Yes specify: c <input type="checkbox"/> Still employed		e <input type="checkbox"/> Terminated	
d <input type="checkbox"/> Suspended		f <input type="checkbox"/> Resigned	

ANNEX "B"

Form for Individual Transaction in a Series

Transaction No. _____																																		
1 Amount involved _____																																		
<table style="width:100%; border:none;"> <tr> <td style="width:15%;"><input type="checkbox"/> a</td> <td style="width:65%;">Philippine currency</td> <td style="width:20%;">Php _____</td> <td style="width:10%; text-align:right;">.00</td> </tr> <tr> <td><input type="checkbox"/> b</td> <td>Foreign currency</td> <td>_____</td> <td style="text-align:right;">.00</td> </tr> <tr> <td><input type="checkbox"/> c</td> <td>Cashier's check(s)</td> <td>_____</td> <td style="text-align:right;">.00</td> </tr> <tr> <td><input type="checkbox"/> d</td> <td>Money order(s)</td> <td>_____</td> <td style="text-align:right;">.00</td> </tr> <tr> <td><input type="checkbox"/> e</td> <td>Bank draft(s)</td> <td>_____</td> <td style="text-align:right;">.00</td> </tr> <tr> <td><input type="checkbox"/> f</td> <td>Traveler's checks</td> <td>_____</td> <td style="text-align:right;">.00</td> </tr> <tr> <td><input type="checkbox"/> g</td> <td>Securities</td> <td>_____</td> <td style="text-align:right;">.00</td> </tr> <tr> <td><input type="checkbox"/> h</td> <td>Others</td> <td>_____</td> <td></td> </tr> </table>			<input type="checkbox"/> a	Philippine currency	Php _____	.00	<input type="checkbox"/> b	Foreign currency	_____	.00	<input type="checkbox"/> c	Cashier's check(s)	_____	.00	<input type="checkbox"/> d	Money order(s)	_____	.00	<input type="checkbox"/> e	Bank draft(s)	_____	.00	<input type="checkbox"/> f	Traveler's checks	_____	.00	<input type="checkbox"/> g	Securities	_____	.00	<input type="checkbox"/> h	Others	_____	
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ANNEX "C"

GUIDELINES FOR PART IV

Your response to Part IV should include a chronological and **complete** account of the possible violation of law or what was considered unusual, irregular or suspicious about the transaction in question. The following is a checklist of the matters that should be included in your response.

- a. **Describe** supporting documentation and retain for 5 years.
- b. **Explain** who benefited, directly or indirectly, from the transaction, how much, and how.
- c. **Retain** any confession, admission, or explanation of the transaction provided by the suspect and indicate to whom and when it was given.
- d. **Retain** any confession, admission, or explanation of the transaction provided by any other person and indicate to whom and when it was given.
- e. **Retain** any evidence of cover-up or evidence of an attempt to deceive federal or state examiners or others.
- f. **Indicate** where the possible violation took place (e.g., main office, branch, other).
- g. **Indicate** whether the possible violation is an isolated incident or relates to other transactions.
- h. **Indicate** whether there is any related litigation; if so, specify.
- i. **Recommend** any further investigation that might assist law enforcement authorities.
- j. **Indicate** whether any information has been excluded from this report; if so, why?
- k. If you are correcting a previously filed report, describe the changes that are being made.
- l. **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, domestic or international money order, stocks, bonds, traveler's checks, wire transfers sent or received, cash, etc.).
- m. **Indicate** any account number that may be involved or affected.

PART IV Persons Preparing Report

50 Name of person preparing this report

Last

First

M.I.

Title/position

Signature

51 Contact number

52 Date signed

 / /
(MM)/(DD)/(YYYY)

53 Place signed