

**ANNEX “B”**

**SUSPICIOUS TRANSACTION REPORT (STR)**

<b>Suspicious Transaction Report</b>		<b>SEC FORM NO.</b> _____ January 2002
<p>1 Check box below only if correcting a prior report.</p> <p><input type="checkbox"/> Corrects Prior Report (see Part V under How to Make a Report)</p>		
<b>PART I Reporting Covered Institution Information</b>		
2 Name of Covered Institution		
4 Address of Covered Institution		5 Tel. Nos. /Fax Nos.
6 Address of Branch Office(s) where transaction occurred		7 If institution closed, date closed ____/____/____ MM DD YYYY
8 Account number(s) affected	Date Opened	Closed?
a _____	_____	<input type="checkbox"/> Yes
b _____	_____	<input type="checkbox"/> No
c _____	_____	<input type="checkbox"/> Yes
d _____	_____	<input type="checkbox"/> No
9. Nature of Transaction(s)/Account(s)		
<b>PART 2 Suspect Information</b>		
10 Last Name or Name of Entity		11 First Name
		12 Middle
13 Address		14 SSN, GSIS or TIN
15 Date of Birth ____/____/____ MM DD YYYY	16 Phone Number – Residence	167 Phone Number - Work
18 Occupation/Type of Business		19 Admission/Confession? a <input type="checkbox"/> Yes      b <input type="checkbox"/> No
20 Forms of Identification for Suspect:		
a <input type="checkbox"/> Driver's License    b <input type="checkbox"/> Passport    c <input type="checkbox"/> Alien Registration    d <input type="checkbox"/> Other _____		
Number _____ Issuing Authority _____		
Date Issued _____ Date Expires _____		
21 Relationship to Covered Institution:		
a <input type="checkbox"/> Accountant	d <input type="checkbox"/> Attorney	g <input type="checkbox"/> Customer
b <input type="checkbox"/> Agent	e <input type="checkbox"/> Borrower	h <input type="checkbox"/> Director
c <input type="checkbox"/> Appraiser	f <input type="checkbox"/> Broker	i <input type="checkbox"/> Employee
		j <input type="checkbox"/> Officer
		k <input type="checkbox"/> Shareholder
		l <input type="checkbox"/> Other
_____		
22 Is the relationship an insider relationship?    a <input type="checkbox"/> Yes    b <input type="checkbox"/> No		22 Date of Suspension, Termination, Resignation
If Yes specify: c <input type="checkbox"/> Still employed    e <input type="checkbox"/> Terminated		____/____/____ MM DD YYYY
d <input type="checkbox"/> Suspended    f <input type="checkbox"/> Resigned		

<b>PART III</b>		<b>Suspicious Transaction Information</b>	
23 Date or date range of suspicious transaction From ____ / ____ / ____ To ____ / ____ / ____ <small>MM DD YYYY</small>	24 Total amount involved in known or suspicious transaction Peso _____ Dollar _____ Other Currency _____		
25 Basis of Suspicion: Check any of the listed Predicate Crimes <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Kidnapping for ransom</li> <li>b. <input type="checkbox"/> Dangerous Drugs Act (Secs. 3,4,5,7,8,,9 of Art. 2)</li> <li>c. <input type="checkbox"/> Anti-Graft and Corrupt Practices Act (RA 3019, Secs. 3 (b,c,e,g,h, i)</li> <li>d. <input type="checkbox"/> Plunder (RA 7080)</li> <li>e. <input type="checkbox"/> Robbery and extortion (Revised Penal Code, Arts. 294, 295, 296, 299, 300, 301, 302)</li> <li>f. <input type="checkbox"/> Jueteng and masiao (Illegal Gambling PD 1602)</li> <li>g. <input type="checkbox"/> Piracy in the high seas</li> <li>h. <input type="checkbox"/> Qualified theft (RPC Art. 310)</li> <li>i. <input type="checkbox"/> Swindling (Estafa RPC Art. 315)</li> <li>j. <input type="checkbox"/> Smuggling (RA 455 and 1937)</li> <li>k. <input type="checkbox"/> E-Commerce (RA 8792)</li> <li>l. <input type="checkbox"/> Hijacking (RA 6235)</li> <li>m. <input type="checkbox"/> Destructive arson and murder, those perpetrated by terrorists against non-combatant persons and similar targets</li> <li>n. <input type="checkbox"/> Fraudulent practices and violations of SRC (RA 8799)</li> <li>o. <input type="checkbox"/> Felonies or offenses of similar nature punishable under penal laws of other countries, specify _____</li> </ul>			
27 Name of Person (s) Making this report	28 Position in Covered Institution		
29 Contact Number	30 Date Prepared		
31 Signature of Person/s Making this Report			
32 Name of Person Receiving This Report	33 Position		
34 Contact Number	35 Date Received		
36 Signature of Person Receiving This Report			
37 Copy of the following documents attached			
a <input type="checkbox"/> Customer Identification: Enumerate          b <input type="checkbox"/> Relevant Documents supporting the suspicious transactions: Enumerate          c <input type="checkbox"/> Copy of Authorization from Covered Institution of Persons Making, Preparing and Approving This Report			

**PART IV: Suspicious Transaction Information Explanation/Description**

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

**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. Provide below a chronological and **complete** account of the possible violation of law, including what is unusual, irregular or suspicious about the transaction, using the following checklist as you prepare your account. **If necessary, continue the narrative on a duplicate of this page.**

- 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.

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

## **PART V: Suspicious Transaction Report Instructions**

**Safe Harbor Provisions of the Anti-Money Laundering Act of 2001, Republic Act No. 9169, under Section 9** © provides complete protection from criminal, civil and/or administrative liability for all reports of suspected or known criminal violations and suspicious activities to appropriate authorities, including supporting documentation..

Specifically, the law provides that a covered institution, and its directors, officers, employees and agents, that make a disclosure of any possible violation of law or regulation, shall not be liable to any person under any law or regulation of the Philippines or any constitution, law, or regulation of any country or political subdivision thereof, for such disclosure or for any failure to notify the person involved in the transaction or any other person of such disclosure, when such reporting was done in good faith and in the regular performance of their duties and responsibilities under the Act.

The law further requires that a covered institution, and its directors, officers, employees and agents who, by means of a suspicious transaction report, report suspected or known criminal violations or suspicious activities may not notify any person involved in the transaction that the transaction has been reported. Any breach of this confidentiality provision shall render them criminally, civilly and administratively liable under the law.

In situations involving violations requiring immediate attention, such as when a reportable violation is ongoing, the covered institution shall immediately notify, by telephone, appropriate law enforcement and covered institution supervisory authorities in addition to filing a timely suspicious transaction report.

### **WHEN TO MAKE A REPORT:**

1. All covered institutions falling under Section 3 (a)(3) of the Anti-Money Laundering Act of 2001, Republic Act No. 9160 are required to make this report following the discovery of:
  - a. **Violations involving any amount.** Whenever the covered institution detects any known or suspected violation of any the predicate crimes under the Act, or pattern of criminal violations, committed or attempted against the covered institution or involving a transaction or transactions conducted through the covered institution, where the covered institution believes that it was either an actual or potential victim of a criminal violation, or series of criminal violations, or that the covered institution was used to facilitate a criminal transaction, and the covered institution has a substantial basis for identifying the suspect, which may include one of its directors, officers, employees, agents or other institution-affiliated parties as having committed or aided in the commission of a criminal act regardless of the amount involved in the violation.
  - b. **Violations aggregating PhP4,000,000.00 or more where a suspect can be identified.** Whenever the covered institution detects any known or suspected predicate crime violation, or pattern of criminal violations, committed or attempted against the covered institution or involving a transaction or transactions conducted through the covered institution and involving or aggregating Php4,000,000.00 or more in funds or other assets, through one transaction or a series of transactions, where the covered institution reasonably believes that it was either an actual or potential victim of a criminal violation, or series of criminal violations, or that the covered institution was used to facilitate a criminal transaction, and the covered institution has a substantial basis for identifying a possible suspect or group of suspects, which may include one of its directors, officers, employees, agents or other institution-affiliated parties. If it is determined prior to filing this report that the identified suspect or group of suspects has used an alias, then information regarding the true identity of the suspect or group of suspects, as well as alias identifiers, such as drivers' licenses or social security numbers, addresses and telephone numbers, must be reported.
2. The covered institution shall use as guidelines the examples of suspicious transactions attached as Annex "B" to the Commission's Circular No. \_\_\_\_\_. These are not intended to be exhaustive and only provide examples of the most basic ways in which money may be laundered. Identification of any of the transactions listed should prompt initial enquiries and, if necessary, further investigations on the source of funds.

3. A covered institution is required to file a suspicious transaction report no later than **five (5)** calendar days after the date of initial detection of facts that may constitute a basis for filing a suspicious transaction report. If no suspect was identified on the date of detection of the incident requiring the filing, a covered institution may delay filing a suspicious transaction report for an additional **ten (10)** calendar days to identify a suspect. In no case shall reporting be delayed more than **twenty (20)** calendar days after the date of initial detection of a reportable transaction.

**HOW TO MAKE A REPORT:**

1. Send each completed Suspicious Transaction Report to:

**THE EXECUTIVE DIRECTOR  
ANTI-MONEY LAUNDERING COUNCIL  
BANGKO SENTRAL NG PILIPINAS  
ROXAS BOULEVARD  
PASAY CITY**

2. For items that do not apply or for which information is not available, leave blank.
3. If you are correcting a previously filed report, check the box at the top of the report (line 1). Complete the report in its entirety and include the corrected information in the applicable boxes. Then describe the changes that are being made in Part IV.
4. If more space is needed to report additional suspects, attach copies of PART IV to provide the additional information.
5. **Identification Requirements for Persons Preparing and Making the Report.— This is important!** All individuals conducting a reportable transaction(s) for themselves or for another person must be identified by means of an official document(s) from the covered institution as the person/s authorized to make such a report.