

Place name of Institution here

**SUSPICIOUS TRANSACTIONS / SUSPICIOUS ACTIVITY REPORT**

Made in accordance with the Provisions of Section 55(3) of the Proceeds of Crime Act, Ch. 11:27 (as amended)

Ref. No.....

**ALWAYS COMPLETE ENTIRE REPORT**

Instructions: Reports on suspicious Financial Transactions shall be made to the Financial Intelligence Unit within fourteen (14) days of the date the transaction was deemed to be suspicious by the institution.[8.55(3)]

Notice to staff

It is an offence to fail to report a suspicious transaction for which the penalty is (a) on summary conviction, five hundred thousand dollars and imprisonment for a term of two years (b) on conviction on indictment, a fine of three million dollars and imprisonment for a term of seven years. [S.57(1)]

- 1. Check appropriate box: a. ( ) Initial Report b. ( ) Corrected Report c. ( ) Supplemental Report

**PART I**

**REPORTING FINANCIAL INSTITUTION OR RELEVANT BUSINESS ACTIVITY INFORMATION**

- 2. Name of Financial Institution or Person or Company engaged in a relevant business activity
3. Address of Financial Institution or Person or Company engaged in a relevant business activity
4. Address of Branch Office(s) where activity occurred
5. Asset Size of Financial Institution or Person or Company engaged in a relevant business activity: \$
6. If Institution or relevant business activity closed, date closed DD MM YY
7. Account Number(s) affected (if any)
8. Have any of the Institution's or relevant business accounts related to this matter been closed? (a) ( ) Yes if yes identify (b) ( ) No

**PART II**

**SUSPECT INFORMATION**

- 9. Last Name or Name of Entity: 10. First Name: 11. Middle Initial:
12. Address:
13. Date of Birth DD MM YY 14. Home No.: 14 a. Cell No.
(a) Co.Reg.No. 15. Work No.
(b) VAT Reg. No.
(c) B.I.R. No.
16. Occupation:
17. Forms of Identification for Suspect: (a) ( ) Driver's License (b) ( ) Passport (c) ( ) Trinidad & Tobago I.D. Card (d) ( ) Other
.....Number.....Issuing Authority.....
.....Number.....Issuing Authority.....
.....Number.....Issuing Authority.....
.....Number.....Issuing Authority.....

