



Declaration of Source of Funds

1. Check all boxes that apply: Conducted on Own Behalf Agent Multiple Persons Multiple Transactions

Part 1 Details of Person or Entity Performing Transaction

2. Last Name or Entity Name	3. First Name	4. Middle Name	5. Date of Birth _ / _ / _ _ _ _ M M D D Y Y Y Y
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6. Trading As:	7. Occupation, Profession or Business
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8. Address Parish/County/Township Country	9. Method of Identity Verification <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Electoral Card <input type="checkbox"/> Other Issued by: Number:
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10. Contact Details
Home #: Work #: Mobile #:
Fax #: Email Address:

Part 2 Transaction Details – Check all boxes that apply

11. Type of Transaction:
 Deposit(s) Wire Transfer(s)
Description:
Issuing Bank:
Address:
Remitter's Name:

Currency Exchange(s) Negotiable Instrument(s) Funds Transfer

12. Transaction Amount Total Cash in EC\$ Total Foreign Cash in Total Cheque in EC\$ Total Foreign Wire in	13. Account Numbers Affected (if any)	14. Transaction Date _ / _ / _ _ _ _ M M D D Y Y Y Y
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15. Caribbean Union Bank Branch where transaction took place
 Main Branch - Friar's Hill Rd -Jolly Harbour Branch – Jolly Harbour

Part 3 Signatures and Authorizations

16. Bank Policy, Declaration And Supporting Documentation
I acknowledge that it is the policy of Caribbean Union Bank Ltd. to verify the source of funds for large deposits to an account, and to determine that funds for deposit, transfer, or the purchase of any other instrument are derived from legitimate sources only and are not associated with financing crime or terrorism. I understand that it is an offense under the Money Laundering (Prevention) Act, 1996, as amended, to engage directly or indirectly in a transaction that involves property, including cash, processing, managing, investing, concealing, disguising, disposing of or bringing into Antigua and Barbuda any property, including cash that is the proceeds of crime. I further understand that it shall not be unlawful for the Bank or its Officers to make any disclosure in compliance with this Act, and consent is hereby given to Caribbean Union Bank and its Officers to disclose information provided herein which may be requested by due process under this Act.
I declare that the source of funds for this transaction and related details are:
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<input type="checkbox"/> I/We have attached supporting documentation (e.g. Invoice copy, a bill, a remittance advice) for this transaction.	17. Customer's Signature _ / _ / _ _ _ _ M M D D Y Y Y Y
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FOR CARIBBEAN UNION BANK USE ONLY

Transaction Accepted Transaction Declined Customer Refused to Fill Out and Sign Form Customer's Explanation Not Valid
 Other:

Transaction Taken By: _ / _ / _ _ _ _ M M D D Y Y Y Y	Approving Officer's Job Title & Signature _ / _ / _ _ _ _ M M D D Y Y Y Y	Compliance Officer's Signature _ / _ / _ _ _ _ M M D D Y Y Y Y
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