

SUSPICIOUS TRANSACTION REPORT (STR)

Form B

	Form B					
	Pursuant to Section 9 of the Anti-Money Laundering Act, 2013					
	KINDLY FILL IN CAPITAL					
PART 1	REPORT DETAILS					
1.1	ENTITY REFERENCE NUMBER					
1.2	FIA REFERENCE NUMBER					
1.3	SUBMISSION DATE					
PART 2	INFORMATION ON REPORTING ENTITY/PER	SON				
2.1	REPORTING ENTITY DETAILS					
	NAME OF REPORTING ENTITY					
	BUSINESS TYPE					
	SECTOR					
	ID ALLOCATED BY FIA					
2.2	TYPE OF REPORTING ENTITY					
	ADVOCATE/ACCOUNTANT/AUDITOR		BROKER/DEALER/INVESTMENT ADVISOR UNDER CMA			
	BOARD OF EXECUTORS/TRUST COMPANY		INSURANCE COMPANY/BROKER/AGENT			
	CASINO		REGISTRAR OF COMPANIES			
	REAL ESTATE AGENT		REGISTRAR OF LAND			
	DEALER IN PRECIOUS METALS AND GEMS		UGANDA INVESTMENT AUTHORITY			
	TRUST AND COMPANY SERVICE PROVIDER		LICENSING AUTHORITY			
	FINANCIAL INSTITUTION		NGO, CHURCH, OTHER CHARITABLE ORGANIZATION			
	OTHER (SPECIFY)					
2.3	PARTICULARS OF THE MONEY LAUNDERING		CER (MLCO)			
	SURNAME					
	OTHER NAMES					
	DESIGNATION/TITLE					

	TELEPHONE NUMBER(S)			EMAIL	
2.4	ADDRESS OF REPORTING ENTITY/PERSON				
	STREET ADDRESS				
	POSTAL ADDRESS				
	CITY/TOWN				
	TELEPHONE NUMBER			EMAIL	
	SUPERVISED/REGULATED BY				
	TOTAL NUMBER OF PAGES ATTACHED	TO THIS ST	R		
PART 3	INFORMATION ON SUSPICION				
3.1	PARTICULARS OF PERSON OR BUSINE	ESS ENTITY I	BEING REPORTED OR (CONDUCTING A TR	ANSACTION
	NUMBER OF PERSONS REPORTED IN 1	THIS STR	BUSINESS ENTITIES		NATURAL PERSONS
3.1.1	BUSINESS ENTITY				
	NAME OF BUSINESS ENTITY				
	REGISTRATION NUMBER			DATE OF INCORI	PORATION
	TAX IDENTIFICATION NUMBER (TIN)				
	REGISTERED OFFICE				
	NATURE OF BUSINESS				
	ADDRESS				
	TELEPHONE				
	EMAIL				
3.1.2	NATURAL PERSON				
	TITLE				
	SURNAME				
	OTHER NAMES				
	TAX IDENTIFICATION NUMBER (TIN)				

	DATE OF BIRTH					
	IDENTIFICATION DOCUMENT	IDENTITY CARD NO.				
		DRIVING LICENCE NO.				
		PASSPORT NO.				
		OTHER (SPECIFY)				
	NATIONALITY			COUNTRY OF RES	SIDENCE	
	ADDRESS					
	TELEPHONE					
	EMAIL					
.2	REASONS FOR SUSPICION (TICK A	S APPLICABLE, MULTIPLE S	ELECTION IS	POSSIBLE)		
		Y OF CLIENT			ACTIVITY IN AC	COUNT
		OUND OF CLIENT			NATURE OF TRA	
		LE ACCOUNTS			VALUE OF TRAN	ISACTION
	OTHER REASON (SPECIFY)					
_						
.3	DESCRIPTION OF SUSPICIOUS AC GIVE A DETAILED ACCOUNT. USE ADD Any useful information that could Any relationships that exist betwee The names of any other institution Any other bank account(s), includ Sources of funds Any remarks, comments or explan Any previous activity in the preced Any previous reports made in con-	ITIONAL PAGES IF NECESSARY. not be accommodated so far en reported individuals/entiti s or branches or persons inv ing accounts at other institut ations which persons involve ling six months which were o	in the repo ies volved in the tions, that m ed in the tra	rt fields e transaction ay be involved in t nsaction may have	the transaction 2 made or provia	led

3.4	DESCRIPTIO	N OF ACTION TAKEN
	What action w	vas or will be taken by you as a result of the suspicious transaction(s)?
	Also state wh	ether the suspect made any voluntary statements as to the origin or source of the proceeds. of the statement, if any.
	Enclose copy of	j the statement, ij uny.
<u> </u>		
PART 4	GOODS AND	
	Fill this section	n if the transaction involved the purchase or sale of property/goods or sevices
I		

	YPE OF PROPERTY				
	OWNER OF PROPERTY BEFORE TRANSACTION				
	OWNER OF PROPERTY AFTER TRANSACTION				
	STIMATED VALUE OF THE PROPERTY				
	ANNER IN WHICH THE PROPERTY WAS DISPOSED OFF				
	ALUE FOR WHICH THE PROPERTY WAS DISPOSED OFF				
	OCATION OF THE PROPERTY				
PART 5	OURCE ACCOUNT OF THE FUNDS				
5.1	ADDE OF TRANSACTION CASH CURRENCY EXCHANGE				
	DTHER (SPECIFY)				
5.2	ACCOUNT DETAILS				
	WIFT/BIC CODE				
	ACCOUNT NUMBER				
	BANK/BRANCH WHERE ACCOUNT IS HELD				
	COUNTRY OF ORIGIN (IF OUTSIDE UGANDA)				
	ACCOUNT CURRENCY				
	CCOUNT BALANCE AT DATE OF TRANSACTION				
	DATE ACCOUNT WAS OPENED				
	YPE OF ACCOUNT				
	PURPOSE OF FUNDS				
5.3	DWNER OF ACCOUNT (IF BUSINESS ENTITY)				
	IAME				
	REGISTRATION NUMBER REGISTRATION DATE				
	REGISTERED OFFICE				

	NATURE OF BUSINESS	
	ADDRESS	
	TELEPHONE NUMBER(S)	
	TELEPHONE NOWBER(3)	
5.4 5.4.1	DIRECTORS/OWNERS OF BUSI DIRECTOR/OWNER 1	INESS ENTITY (USE SEPARATE PAPER IF MORE THAN TWO)
	SURNAME	OTHER NAMES
	DATE OF BIRTH	
	IDENTIFICATION DOCUMENT	IDENTITY CARD NO.
		DRIVING LICENCE NO.
		DASSROOT NO
		PASSPORT NO.
		OTHER (SPECIFY)
	NATIONALITY	COUNTRY OF RESIDENCE
	ADDRESS	
	TELEPHONE NUMBER	OCCUPATION
5.4.2	DIRECTOR/OWNER 2	
	SURNAME	OTHER NAMES
	DATE OF BIRTH	
	IDENTIFICATION DOCUMENT	IDENTITY CARD NO.
	DENTIFICATION DOCOMENT	IDENTITY CARD NO.
		DRIVING LICENCE NO.
		PASSPORT NO.
		OTHER (SPECIFY)
	NATIONALITY	COUNTRY OF RESIDENCE
	ADDRESS	
	TELEPHONE NUMBER	OCCUPATION

5.5	SIGNATORIES TO THE ACCOU	INT (USE SEPARATE PAPER IF MORE THA	N TWO)
5.5.1	SIGNATORY 1		
	SURNAME		OTHER NAMES
	DATE OF BIRTH		
	IDENTIFICATION DOCUMENT	IDENTITY CARD NO.	
		DRIVING LICENCE NO.	
		PASSPORT NO.	
		OTHER (SPECIFY)	
	NATIONALITY	COUNTR	Y OF RESIDENCE
	ADDRESS		
	TELEPHONE NUMBER		OCCUPATION
5.5.2	SIGNATORY 2		
	SURNAME		OTHER NAMES
	DATE OF BIRTH		
	IDENTIFICATION DOCUMENT	IDENTITY CARD NO.	
		DRIVING LICENCE NO.	
		PASSPORT NO.	
		OTHER (SPECIFY)	
	NATIONALITY	COUNTR	Y OF RESIDENCE
	ADDRESS		
	TELEPHONE NUMBER		OCCUPATION
PART 6	PARTICULARS OF THE DESTIN	IATION OF FUNDS	
6.1	MODE OF TRANSACTION		
	CASH		
	ELECTRONIC FUNDS TRANSFE	к	
	INSURANCE POLICY		BANK DRAFT
	OTHER (SPECIFY)		

6.2	ACCOUNT DETAILS	
	SWIFT/BIC CODE	
	ACCOUNT NUMBER	
	BANK/BRANCH WHERE ACCOU	IT IS HELD
	ACCOUNT CURRENCY	
	ACCOUNT BALANCE AT DATE O	TRANSACTION
	DATE ACCOUNT WAS OPENED	
	TYPE OF ACCOUNT	
	PURPOSE OF FUNDS	
6.3	OWNER OF ACCOUNT (IF BUSI	ESS ENTITY)
	NAME	
	REGISTRATION NUMBER	REGISTRATION DATE
	REGISTERED OFFICE	
	NATURE OF BUSINESS	
	ADDRESS	
	TELEPHONE NUMBER(S)	
6.4	DIRECTORS/OWNERS OF BUSIN	ESS ENTITY (USE SEPARATE PAPER IF MORE THAN TWO)
6.4.1	DIRECTOR/OWNER 1	
	SURNAME	OTHER NAMES
	DATE OF BIRTH	
	IDENTIFICATION DOCUMENT	IDENTITY CARD NO.
		DRIVING LICENCE NO.
		PASSPORT NO.
		OTHER (SPECIFY)
	NATIONALITY	COUNTRY OF RESIDENCE
	ADDRESS	

	TELEPHONE NUMBER				OCCUPATION	
6.4.2	DIRECTOR/OWNER 2					
	SURNAME				OTHER NAMES	
	DATE OF BIRTH					
	IDENTIFICATION DOCUM	ENT	IDENTITY CARD NO.			
			DRIVING LICENCE NO.			
			PASSPORT NO.			
			OTHER (SPECIFY)			
	NATIONALITY			COUNTRY O	F RESIDENCE	
	ADDRESS					
	TELEPHONE NUMBER				OCCUPATION	
6.5 6.5.1	SIGNATORIES TO THE AC	COUNT (USE	SEPARATE PAPER IF N	IORE THAN T	WO)	
	SURNAME				OTHER NAMES	
	DATE OF BIRTH					
	IDENTIFICATION DOCUM	ENI	IDENTITY CARD NO.			
			DRIVING LICENCE NO.			
			PASSPORT NO.			
			OTHER (SPECIFY)			
	NATIONALITY			COUNTRY OF	FRESIDENCE	
	ADDRESS					
	TELEPHONE NUMBER				OCCUPATION	
6.5.2	SIGNATORY 2					
	SURNAME				OTHER NAMES	
	DATE OF BIRTH					
	IDENTIFICATION DOCUM	ENT	IDENTITY CARD NO.			
I			DRIVING LICENCE NO.			

	PASSPORT NO.
	OTHER (SPECIFY)
NATIONALITY	COUNTRY OF RESIDENCE
ADDRESS	
TELEPHONE NUMBER	OCCUPATION
PART 7 DOCUMENTS ATTACHED	TO THIS STR (PROVIDE LIST)
	1
	2
	3
	4
	5
	6
	7
	8
BY SUBMITTING THIS STR,	, I THE MLCO IDENTIFIED HEREUNDER, CONFIRM THAT
	BEST OF MY KNOWLEDGE, TRUE AND CORRECT.
NAME OF MLCO	SIGNATURE