



**NOTE: Please copy this page for each additional, related, large cash transaction (if required).**

**PART B1 — Information about how the transaction was initiated**

Transaction  of

1. Date of the transaction\*

YEAR MONTH DAY

2. Time of the transaction

HOUR MINUTES SECONDS

4. Date of posting (if different from date of transaction)

YEAR MONTH DAY

or

3. Night deposit indicator\*

If the transaction was **not** a night drop, leave this box empty.

3A. Quick drop indicator

If the transaction was **not** a quick drop, leave this box empty.

5. Amount of transaction\*

6. Transaction currency code\* — Enter CAD if Canadian dollars or USD for United States dollars. If another type of currency is involved, refer to FINTRAC's guidance for submitting reports by fax or mail.

7. How was the transaction conducted?\*

- Armoured car       In-branch/Office/Store       Quick drop  
 Automated banking machine       Mail deposit       Telephone  
 Courier       Night deposit       Other   
DESCRIPTION (OTHER)



**NOTE: Please copy this page for each additional, related, disposition (per transaction) (if required).**

**PART B2 — Information about how the transaction was completed**

Transaction  Disposition  of

Indicate whether this transaction was conducted on behalf of anyone other than the individual who conducted it. If not, indicate "not applicable."

- On behalf of:**  **not applicable**  **another individual** (also complete PART G)  
 **an entity (other than an individual)** (also complete PART F)  **employee depositing cash to employer's business account**

**8. Disposition of funds\***

- |  |  |   |  |  |
|--|--|---|--|--|
| <input type="checkbox"/> <b>Added to virtual currency wallet</b> | <input type="checkbox"/> <b>Exchange to virtual currency</b>           | <input type="checkbox"/> <b>Outgoing domestic funds transfer</b>      | <input type="checkbox"/> <b>Purchase of casino product</b> | <input type="checkbox"/> <b>Purchase of precious stones</b>              |
| <input type="checkbox"/> <b>Cash</b>                             | <input type="checkbox"/> <b>Holding funds</b>                          | <input type="checkbox"/> <b>Outgoing email money transfer</b>         | <input type="checkbox"/> <b>Purchase of diamonds</b>       | <input type="checkbox"/> <b>Purchase of prepaid payment product/card</b> |
| <input type="checkbox"/> <b>Denomination exchange</b>            | <input type="checkbox"/> <b>Investment product purchase/deposit</b>    | <input type="checkbox"/> <b>Outgoing international funds transfer</b> | <input type="checkbox"/> <b>Purchase of jewellery</b>      | <input type="checkbox"/> <b>Purchase of traveller's cheques</b>          |
| <input type="checkbox"/> <b>Deposit to an account</b>            | <input type="checkbox"/> <b>Issued cheque</b>                          | <input type="checkbox"/> <b>Outgoing virtual currency transfer</b>    | <input type="checkbox"/> <b>Purchase of money order</b>    | <input type="checkbox"/> <b>Real estate purchase/deposit</b>             |
| <input type="checkbox"/> <b>Exchange to fiat currency</b>        | <input type="checkbox"/> <b>Life insurance policy purchase/deposit</b> | <input type="checkbox"/> <b>Purchase of bank draft</b>                |  |  |
- Other**  POLICY NUMBER
- Other**  DESCRIPTION (OTHER)

**9. Amount of disposition\***

**10. Disposition currency code\*** — Enter CAD if Canadian dollars or USD for United States dollars. If another type of currency is involved, refer to FINTRAC's guidance for submitting reports by fax or mail.

**Additional information about the funds described in field 8 above**

**12. Other entity or person account number or policy number\*** (if applicable)



**NOTE: Please copy this page for each additional disposition (if applicable).**

**PART C — Account information, if the transaction involved an account**

Transaction  Disposition

Complete this Part ONLY if the transaction involved an account.

1. Branch or transit number where the account is held\* (if this part is applicable)

\_\_\_\_\_

2. Account number\* (if this part is applicable)

\_\_\_\_\_

3. Type of account\* (if this part is applicable)

Personal

Business

Trust

Other

DESCRIPTION (OTHER)

\_\_\_\_\_

4. Account currency code\* (if this part is applicable) — Enter CAD if Canadian dollars or USD for United States dollars. If another type of currency is involved, refer to FINTRAC's guidance for submitting reports by fax or mail.

\_\_\_\_\_

5. Full name of each account holder (the individual(s) or the entity that hold the account)\* (if this part is applicable)

**1** \_\_\_\_\_

**2** \_\_\_\_\_

**3** \_\_\_\_\_



**NOTE: Please copy this page for each additional transaction (if applicable).**

Transaction

**PART D — Information about the individual conducting the transaction if it is not a deposit into a business account (if applicable)**

If the transaction is reportable as one of multiple cash transactions of less than \$10,000 each and, because of this, information for any mandatory fields in this part was not obtained at the time of the transaction (and is not available from your records), you can leave those fields blank.

1. Surname\* (if this part is applicable)  2. Given name\* (if this part is applicable)  3. Other/Initial

4. Client number assigned by reporting entity\* (if applicable and if this part is applicable)

5. Street address\* (if this part is applicable)

6. City\* (if this part is applicable)

7. Province or state\* (if this part is applicable)  8. Country\* (if this part is applicable)

9. Postal or Zip code\* (if this part is applicable)

10. Country of residence

11. Home telephone number (with area code)

12. Individual's identifier\* (if this part is applicable)

Birth certificate  Driver's licence  Passport  Provincial health card  Record of landing / Permanent resident card

Other   
DESCRIPTION (OTHER)

13. ID number (from question 12)\* (if this part is applicable)

14. Jurisdiction of issue – Country\* (if applicable)

15. Jurisdiction of issue – Province or state\* (if applicable)

16. Individual's date of birth\* (if this part is applicable)  
    
YEAR MONTH DAY

17. Individual's occupation\* (if this part is applicable)

18. Individual's business telephone number (with area code)  18A. Telephone extension number



**NOTE: Please copy this page for each additional transaction (if applicable).**

**PART E — Information about the individual conducting the transaction if it is a deposit into a business account —  
other than a night deposit or quick drop (if applicable)**

If the transaction is reportable as one of multiple cash transactions of less than \$10,000 each and, because of this, information for any mandatory fields in this part was not obtained at the time of the transaction (and is not available from your records), you can leave those fields blank.

Transaction

1. Surname\* (if this part is applicable)

2. Given name\* (if this part is applicable)

3. Other/Initial



**NOTE: Please copy this page for each additional disposition (if applicable).**

Transaction  Disposition

**PART F — Information about the entity on whose behalf the transaction was conducted (if applicable)**

If the transaction is reportable as one of multiple cash transactions of less than \$10,000 each and, because of this, information for any mandatory fields in this part was not obtained at the time of the transaction (and is not available from your records), you can leave those fields blank.

1. Name of corporation, trust or other entity\* (if this part is applicable)

2. Type of business\* (if this part is applicable)

3. Street address\* (if this part is applicable)

4. City\* (if this part is applicable)

5. Province or state\* (if this part is applicable)

6. Country\* (if this part is applicable)

7. Postal or Zip code\* (if this part is applicable)

8. Business telephone number (with area code)

8A. Telephone extension number

9. Incorporation number\* (if applicable and if this part is applicable)

10. Jurisdiction of incorporation – Country\* (if applicable and if this part is applicable)

11. Jurisdiction of incorporation – Province or state\* (if applicable and if this part is applicable)

12. Individual(s) authorized to bind the entity or act with respect to the account (up to three)

1

2

3



**NOTE: Please copy this page for each additional disposition (if applicable).**

Transaction  Disposition

**PART G — Information about the individual on whose behalf the transaction was conducted (if applicable)**

If the transaction is reportable as one of multiple cash transactions of less than \$10,000 each and, because of this, information for any mandatory fields in this part was not obtained at the time of the transaction (and is not available from your records), you can leave those fields blank.

1. Surname\* (if this part is applicable) \_\_\_\_\_ 2. Given name\* (if this part is applicable) \_\_\_\_\_ 3. Other/Initial \_\_\_\_\_

4. Street address\* (if this part is applicable) \_\_\_\_\_

5. City\* (if this part is applicable) \_\_\_\_\_

6. Province or state\* (if this part is applicable) \_\_\_\_\_ 7. Country\* (if this part is applicable) \_\_\_\_\_

8. Postal or Zip code\* (if this part is applicable) \_\_\_\_\_

9. Home telephone number (with area code) \_\_\_\_\_

10. Business telephone number (with area code) \_\_\_\_\_ 10A. Telephone extension number \_\_\_\_\_

11. Individual's date of birth  
\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_  
YEAR MONTH DAY

12. Individual's identifier

Birth certificate  Driver's licence  Passport  Provincial health card  Record of landing / Permanent resident card

Other \_\_\_\_\_  
DESCRIPTION (OTHER)

13. ID number (from question 12) \_\_\_\_\_ 14. Country of residence \_\_\_\_\_

15. Jurisdiction of issue – Country \_\_\_\_\_ 16. Jurisdiction of issue – Province or state \_\_\_\_\_

17. Individual's occupation \_\_\_\_\_

**Relationship**

18. Relationship of the individual named in Part D or Part E to the individual named above (fields 1 to 3)

Accountant  Borrower  Customer  Friend  Relative  
 Agent  Broker  Employee  Legal counsel  Other \_\_\_\_\_  
DESCRIPTION (OTHER)