

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

Transaction of

PART B — Reason for filing this report

1. Please describe clearly and completely what led you to file this report about terrorist property.* Provide as many details as possible to explain how you came to be in possession or control of the property. If there is not enough room on the form, attach a separate sheet to provide all the relevant information. Make sure to indicate that this information belongs in field 1 of Part B.

2. Provide as many details as possible about how you know this property is owned or controlled by or on behalf of a terrorist or a terrorist group or about how you believe that this property is owned or controlled by or on behalf of a listed person.

Also include details of what other action you have taken regarding the property, in addition to sending this report to FINTRAC.

If there is not enough room on the form, attach a separate sheet to provide all the relevant information. Make sure to indicate that this information belongs in field 2 of Part B.

Note: You must disclose this property's existence to the Royal Canadian Mounted Police and the Canadian Security Intelligence Service, along with any information about a transaction or proposed transaction for that property. For more information refer to FINTRAC's reporting guidance for your sector.

Information about the terrorist, terrorist group or listed entity

Name of terrorist group, listed person or individual that owns or controls the property (or that the property is owned or controlled on behalf of). If it is an entity, complete field 3. If it is an individual, complete fields 3A-B-C.

3. Full name of terrorist group or listed person

3A. Surname of terrorist or listed person

3B. Given name of terrorist or listed person

3C. Other/Initial

4. Street address

5. City

6. Province or state

7. Country

8. Postal or Zip code

9. Phone number (with area code)

9A. Phone extension number

Information about anyone who owns or controls the property on behalf of the terrorist or listed person above (where applicable)

Name of entity or individual that owns or controls the property on behalf of the terrorist or listed person named in field 3 or fields 3A-B-C (above). If it is an entity, complete field 10. If it is an individual, complete fields 10A-B-C.

10. Full name of terrorist group or listed person

10A. Surname of individual

10B. Given name

10C. Other/Initial

11. Street address

12. City

13. Province or state

14. Country

15. Postal or Zip code

16. Phone number (with area code)

16A. Phone extension number



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

PART D — Account information (if property involves an account)

Property Account of

1. Branch or transit number* (where applicable)

2. Account number* (where applicable)

3. Type of account* (where applicable)

Personal

Business

Trust

Other

DESCRIPTION (OTHER)

4. Currency code* (where 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* (where applicable)

A

B

C

6. Date opened

YEAR MONTH DAY

7. Date closed

YEAR MONTH DAY

8. Status of the account* (if there was a transaction or a proposed transaction, please provide the status at the time the transaction was initiated or proposed.)

Active

Inactive

Dormant



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

PART E2 — Information about the transaction or proposed transaction disposition(s) (where applicable)

Property Transaction Disposition of

If there was a transaction related to the property, indicate how it was completed, i.e., where the money went. If there was a proposed transaction related to the property, indicate how it was proposed to be completed. If there was no transaction related to the property, do not complete this Part, or Parts E1, F, G or H.

Indicate on whose behalf this transaction was conducted.

- On behalf of:**
- The individual who conducted the transaction**
(described in PART F)
 - Another individual (besides the individual who conducted it)**
(also complete PART H)
 - An entity (other than an individual)**
(also complete PART G)

12. Disposition of funds how the transaction was completed* (where applicable)

- | | | |
|--|---|--|
| <input type="checkbox"/> A Added to virtual currency wallet | <input type="checkbox"/> K Outgoing domestic funds transfer | <input type="checkbox"/> R Purchase of jewellery |
| <input type="checkbox"/> B Cash | <input type="checkbox"/> L Outgoing email money transfer | <input type="checkbox"/> S Purchase of money order |
| <input type="checkbox"/> C Denomination exchange | <input type="checkbox"/> M Outgoing international funds transfer | <input type="checkbox"/> T Purchase of precious metals |
| <input type="checkbox"/> D Deposit to an account | <input type="checkbox"/> N Outgoing virtual currency transfer | <input type="checkbox"/> U Purchase of precious stones |
| <input type="checkbox"/> E Exchange to fiat currency | <input type="checkbox"/> O Purchase of bank draft | <input type="checkbox"/> V Purchase of prepaid payment product/card |
| <input type="checkbox"/> F Exchange to virtual currency | <input type="checkbox"/> P Purchase of casino product | <input type="checkbox"/> W Purchase of traveller's cheques |
| <input type="checkbox"/> G Holding funds | <input type="checkbox"/> Q Purchase of diamonds | <input type="checkbox"/> X Real estate purchase/deposit |
| <input type="checkbox"/> H Investment product purchase/deposit | | |
| <input type="checkbox"/> I Issued cheque | | |
| <input type="checkbox"/> J Life insurance policy purchase/deposit | | |

 POLICY NUMBER

Y Other

 DESCRIPTION (OTHER)

13. Amount of disposition* (where applicable)

14. Currency code* (where 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.

Additional information about the funds described in field 12 above

15. Other institution, entity or person name and number* (where applicable)

16. Account number or policy number of other institution, entity or person* (where applicable)



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

Property Transaction

PART F — Information about the individual who conducted or proposed to conduct transaction(s) (where applicable)

1. Surname 2. Given name 3. Other/Initial

1A. Alias – Surname 2A. Alias – Given name 3A. Alias – Other/Initial

4. Client number assigned by reporting person or entity (where applicable)

5. Street address

6. City

7. Province or state 8. Country

9. Postal or Zip code

10. Country of residence

11. Home phone number (with area code)

12. Individual's identifier

A Driver's licence B Birth certificate C Provincial health card D Passport E Record of Landing or Permanent resident card

F Other

DESCRIPTION (OTHER)

13. ID number (from question 12) 13A. Citizenship

14. Jurisdiction of issue – Country 15. Jurisdiction of issue – Province or state

16. Individual's date of birth
YEAR MONTH DAY

17. Individual's occupation

18. Individual's business phone number (with area code) 18A. Phone extension number

19. Individual's employer

20. Employer's street address

21. Employer's city

22. Employer's province or state 23. Employer's country

24. Postal or Zip code

25. Employer's business telephone number (with area code) 25A. Telephone extension number



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

Property Transaction Disposition

PART G — Information about the entity on whose behalf transaction was conducted or proposed to be conducted (where applicable)

1. Name of corporation, trust or other entity

2. Type of business

3. Street address

4. City

5. Province or state

6. Country

7. Postal or Zip code

8. Business phone number (with area code)

8A. Phone extension number

9. Incorporation number (where applicable)

10. Jurisdiction of incorporation – Country

11. Jurisdiction of incorporation – Province or state

12. Individual(s) authorized with respect to the account (up to three (3))

A

B

C



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

Property Transaction Disposition

PART H — Information about the individual on whose behalf transaction was conducted or proposed to be conducted (where applicable)

1. Surname _____ 2. Given name _____ 3. Other/Initial _____

1A. Alias – Surname _____ 2A. Alias – Given name _____ 3A. Alias – Other/Initial _____

4. Street address _____

5. City _____

6. Province or state _____ 7. Country _____

8. Postal or Zip code _____ 9. Home phone number (with area code) _____

10. Office phone number (with area code) _____ 10A. Phone extension number _____ 11. Individual's date of birth _____
YEAR MONTH DAY

12. Individual's identifier

A Driver's licence B Birth certificate C Provincial health card D Passport E Record of Landing or Permanent resident card
 F Other _____
DESCRIPTION (OTHER)

13. ID number (from question 12) _____
14. Jurisdiction of issue – Country _____ 15. Jurisdiction of issue – Province or state _____
16. Country of residence _____ 16A. Citizenship _____

17. Individual's occupation _____

18. Individual's employer _____

19. Employer's street address _____

20. Employer's city _____

21. Employer's province or state _____ 22. Employer's country _____

23. Postal or Zip code _____

24. Employer's business phone number (with area code) _____ 24A. Phone extension number _____

25. Relationship of the individual named in Part F to the individual named above (fields 1 to 3)

A Accountant B Agent C Legal counsel D Borrower E Broker F Customer G Employee H Friend I Relative J Other _____
DESCRIPTION (OTHER)

The information on this form is collected under the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act (the Act)*. It will be used for analytical purposes and may also be used for the purposes of ensuring compliance with the Act. Any personal information is protected under the provisions of the *Privacy Act*. For more information, consult <http://www.fintrac-canafe.gc.ca/atip-airp/infosource-eng.asp>.