Atlantic Bank

DECLARATION OF SOURCE/PURPOSE OF FUNDS

The Money Laundering and Terrorism (Prevention) Act requires that we verify the source of funds and/or purpose of transactions. The information requested will be kept confidential unless required under law by a legal or competent authority.

Date: _____

Branch: _____

Customer Details

Business Partner ID: _____ BP Type: Person Business

Customer's Name: _____

Account and Deposit Details

Account Number: _____ Product: _____ Currency: _____

Deposit Type: _____ Currency: _____

Amount:
Cash: _____
Cheque: _____
Transfer: _____
Total: _____

I declare that the source/purpose of funds for this transaction is:

_____   _____

Account Holder's name (Print)   Account Holder's signature

Depositor's Information (only for deposits made by a 3rd party)

_____   _____   _____

Depositor's name (Print)   Depositor's signature   ID Type / ID Number

Internal Use Only

_____   _____

Officer's Name / Signature   Authorizer's Name / Signature

Comments

_____

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