

TD F 90-22.56

Treasury Form
October 2002

Suspicious Activity Report by Money Services Business



OMB No. 1506-0015

Please type or print. Always complete entire report (see instructions).

1 Check the box if this report corrects a prior report. (See instructions, page 7)

2 Type of filer (check **all** financial services/products offered)

- a Issuer of money order(s)
- b Redeemer of money order(s)
- c Seller of money order(s)
- d Issuer of traveler's check(s)
- e Redeemer of traveler's check(s)
- f Seller of traveler's check(s)
- g Money transmitter
- h U.S. Postal Service (see instructions)
- i Other _____

Part I Subject Information

3 Multiple subjects (See instructions, page 7)

4 Subject type (check only one box)

- a Purchaser/Sender
- b Payee/Receiver
- c Both ("a" & "b")
- d Other

5* Individual's last name or Entity's full name _____ 6* First name _____ 7* Middle initial _____

8* Address _____

9* City _____ 10* State _____ 11* Zip code _____ 12* Country (if not U.S.) _____

13* Government issued identification (if available)

- a Driver's license/State I.D.
- b Passport
- c Alien registration
- d Other _____
- e Number _____
- f Issuing state or country _____

14* SSN/ITIN (individual) or EIN (entity) _____ 15 Date of birth _____ 16 Phone number (include area code) _____ 17 Vehicle Lic.# / State (Optional) _____
 a number _____ b state _____
 MM DD YYYY () - - - - -

18 Customer number, if any _____ 19 Occupation/Type of business _____

20* Endorser's (individual or Entity) name, if any _____ 21* Bank account number of endorser, if any _____ 22* Bank of first deposit, if any _____

Part II Suspicious Instrument/Money Transfer Information

23 Financial services involved in suspicious transaction(s) (Check **all** that apply.)

- a Money Order
- b Traveler's Check
- c Money Transfer
- d Other _____

24* Date or date range of suspicious activity From ____/____/____ To ____/____/____
 MM DD YYYY MM DD YYYY 25 Total dollar amount involved in suspicious activity \$ _____,_____,_____.00

26.1* Serial number(s) of [a] money order(s) or [b] traveler's check(s) c Issuer name _____
 d Starting No. _____ e Ending No. _____

26.2 Serial number(s) of [a] money order(s) or [b] traveler's check(s) c Issuer name _____
 d Starting No. _____ e Ending No. _____

26.3 Serial number(s) of [a] money order(s) or [b] traveler's check(s) c Issuer name _____
 d Starting No. _____ e Ending No. _____

27.1* Money transfer number a Issuer name _____ b No. _____
 27.2 Money transfer number a Issuer name _____ b No. _____

Explanation/description of suspicious activity. This section of the report is **critical**. The care with which it is completed may determine whether or not the described activity and its possible criminal nature are clearly understood by investigators. Provide a clear, complete and chronological description of the activity, including what is unusual, irregular or suspicious about the transaction(s). Use the checklist below, as a guide, as you prepare your description. The description should cover the material indicated in Parts I, II and III, but the money services business (MSB) should describe any other information that it believes is necessary to better enable investigators to understand the suspicious activity being reported.

- a. **Describe** conduct that raised suspicion.
- b. **Explain** whether the transaction(s) was completed or only attempted.
- c. **Describe** supporting documentation and retain such documentation for your file for five years.
- d. **Indicate** a time period, if it was a factor in the suspicious transaction(s), for example, specify the time and whether it occurred during AM or PM. If the activity covers more than one day, identify the time of day when such activity occurred most frequently.
- e. **Retain** any admission or explanation of the transaction(s) provided by the subject(s), or other persons. Indicate when and to whom it was given.
- f. **Retain** any evidence of cover-up or evidence of an attempt to deceive federal or state examiners, or others.
- g. **Indicate** where the possible violation of law(s) took place (e.g., main office, branch, agent location, etc.).
- h. **Indicate** whether the suspicious activity is an isolated incident or relates to another transaction.
- i. **Indicate** for a foreign national any available information on subject's passport(s), visa(s), and/or identification card(s). Include date, country, city of issue, issuing authority, and nationality.
- j. **Indicate** whether any information has been excluded from this report; if so, state reasons.
- k. **Indicate** whether any U.S. or foreign instrument(s) were involved. If so, provide the amount, name of currency, and country of origin.
- l. **Indicate** whether any transfer of money to or from a foreign country, or any exchanges of a foreign currency were involved. If so, identify the currency, country, and sources and destinations of money.
- m. **Indicate** any additional account number(s), and any foreign bank(s) account numbers which may be involved in transfer of money.
- n. **Identify** any employee or other individual or entity (e.g., agent) suspected of improper involvement in the transaction(s).
- o. **For issuers, indicate** if the endorser of money order(s) and/or traveler's check(s) is different than payee. If so, provide the individual's name or entity name; bank's name, city, state and country; ABA routing number; endorser's bank account number; foreign non-bank name (if any); correspondent bank name and account number (if any); etc.
- p. **For selling or paying locations, indicate** if there is a video recording medium or surveillance photograph of the customer.
- q. **For selling or paying locations, if you do not have a record of a government issued identification document, describe** the type, issuer and number of any alternate identification that is available (e.g., for a credit card specify the name of the customer and credit card number.)
- r. **For selling or paying locations, describe** the subject(s) if you do not have the identifying information in Part I or if multiple individuals use the same identification. Use descriptors such as male, female, age, etc.
- s. **If correcting a prior report, complete the form in its entirety and note the changes here in Part VII.**

Information already provided in earlier Parts of this form need not necessarily be repeated if the meaning is clear.

Supporting documentation should not be filed with this report. Maintain the information for your files.

Enter explanation/description in the space below. If necessary, continue the narrative on a duplicate of this page or a blank page.