

Confidential Information

Suspicious Transaction Report (STR)
Date: / /
Form No.:(2) for Exchange House

For official use only:
Office reference number:
Date of receipt of report: / /

To: Anti-Money Laundering &Counter-Financing the Terrorism Office –Iraq
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Address: Iraq, Baghdad, Jaderiya,/ Mahella: 915/ Zuqaq :9

Is this report connected to a STR filed prior to this one? Yes No

If the answer to the above is 'Yes', the reference number of the previous report is to be provided by the office.

Section I : Information about Reporting Entity

- 1-Name of the BankBranch:.....
- 2-Address:.....Telephone Number:.....
- 3-Email:.....
- 4-Name of compliance officer:.....position:.....
- 5-Telephone number:.....Email :.....
- 6-Signature:.....Date:.....

Section II: A- Information about the Natural Person Subject of the Suspicious Transaction Report

1-Customer's Full name:..... Surname:.....

- 2-Mother's full name:.....
- 3-Gender: Male Female
- 4-Marital Status: Married Unmarried
- 5-Nationality: Iraqi Non-Iraqi, nationality to be mentioned
- 6-Residential status: Resident Non- resident
- 7-Occupation:.....
- 8-Employer's name:.....
- 9-Politically Exposed Persons? Yes No
- 10-Start date of the Business Relationship:.....
- 11-Identification number:.....Type :..... Issuing date:.....
- 12-Nationality: Iraqi Non-Iraqi, nationality to be provided.....
- 13-Residential status: Resident: Non-resident
- 14-Passport Number:.....Issuing Date:.....Expiry Date:.....
- 15-Address: Province:.....City:.....
Block No.:.....Alley/Street:.....House/Building.....
- 16-Work Address: Province:.....City:.....
Block No.:.....Alley/Street:.....House/Building.....
- 17:Telephone number:.....Email:.....
- 18: Customer's Identification documents attached:.....

B-Information about the legal person Subject of the Suspicious Transaction Report

- 1-Name:.....
- 2-Name of originators:.....
- 3-Commercial registration number:.....

- 4-Incorporation's nationality:.....
- 5-Branches number of the company:.....
- 6- Persons authorized for drawing and depositing:
- 7-Activity type: Industrial Commercial Agricultural
 Services: Others (to be mentioned):.....
- 8- Country of incorporation:..... date of establishing
- 9-start date of the business relationship:.....
- 10:Telephone number:..... fax number:.....
- 11-Address: Province:..... City:.....
Block No.....Alley/Street:.....House/Building.....
- 12-Name of the external auditor:.....
- 13-Address: Province:..... City:.....
Block No.:.....Alley/Street:.....House/Building.....

Information about Managing Entity Subject of the Suspicious Transaction Report

- 1-Full name:.....surname:.....
- 2- Gender: Male Female
- 3-Marital status: Married Unmarried
- 4-Politacly exposed persons: Yes No
- 5-Telephone number.....Email:.....
- 6-Identification number:.....type:..... Date of issue:.....
- 7-Passport number Date of issue:.....date of expiry:.....
- 8-Address: Province:..... City:.....
Block No.:.....Alley/Street:.....House/Building.....
- 9- All the identification documents of the costumer to be provided.....

Information about Subject with Signing Authority:

- 1-Full name:.....Surname:.....
- 2- Gender: Male Female
- 3-Marital status: Married Unmarried
- 4-Occupation:.....
- 5-Nationality: Iraqi Non-Iraqi.....
- 6-Residential status: Resident Non-resident
- 7-Employer:.....
- 8-Politically Exposed Person: Yes No
- 9-Telephone Number:.....Email:.....
- 10-Identification number:.....Type:.....Date of issue:.....
- 11-Passport number:.....Date of issue:.....Date of expiry:.....
- 12-Address: Province:.....City:.....
- Block No.:.....Alley/Street:.....House/Building.....
- 13- All customer's identification documents attached to this STR.....

c- Information about the Beneficial Owner

- 1-Full Name:.....Surname:.....
- 2- Gender: Male Female
- 3-Marital status: Married Unmarried
- 4-Nationality: Iraqi Non-Iraqi, nationality to be
provided.....
- 5-Residential status: Resident Non-resident

- 6-Occupation:.....
- 7-Employer:.....
- 8-Politically Exposed Person: Yes No
- 9-Telephone Number:.....Email:.....
- 10-Identification Number:.....Type:.....Date of issue:.....
- 11-Passport Number:.....Date of issue:.....Date of expiry:.....
- 12-Residential Address: Province:.....City:.....
- Block No.:.....Alley/Street:.....House/Building.....
- 13- All identification documents of the costumer to be provided.

III- Details of Suspicious Transaction

- 1-Transaction Nature:.....
- 2- Transaction Date:.....
- 3-Transaction Purpose:.....
- 4-Transaction state:.....
- 5-Amount Transacted:.....
- 6- Currency in which the Transaction Carried Out:.....
- 7-Name of originator:.....
- 8-Originator Account Number or Transaction Number:.....
- 9-Name of the Beneficiary Owner:.....
- 10-Beneficiary Account Number (if available):.....
- 11-Name of Receiver:.....
- 12-Receiver's account number:.....
- 13-Country of the Receiver:.....

IV- Description of Reason for Reporting in Details

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V- Measures Taken by the Entity

1-Circumstances surrounding the detection of the suspicious transaction:
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2-Internal procedures taken before reporting:.....
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3-Measures taken in relation to the customer after reporting:.....

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Note: If the space of a field was not enough, the reporting entity may add more pages to the report.

VI-List of Documents attached to the Report

- 1-Account statement for the period of six months
- 2-Copies of account opening forms.
- 3-KYC form of the suspicious customer.
- 4-Documents supporting the suspicion.
- 5-Documents related to the nature of the transaction.

Name of the Reporting Entity

Signature