

Bank of Saint Lucia Limited Financial Centre Building 1 Bridge Street P.O. Box 1860	Date of Transaction: (dd/mm/yy)
	Account Number:

DECLARATION OF SOURCE OF FUNDS FORM
Section 21 of the Money Laundering (Prevention) Act 2010

Information on Business or Depositor (if different to account holder)

NAME			
Current Address:			
Resident e Status : Resident <input type="checkbox"/> Non-resident <input type="checkbox"/>			
Date of Birth	Place of Birth	Nationality	Occupation
Telephone Numbers	Home:	Work:	Mobile:

Information on account holder

Name:			
Date of Birth	Place of Birth	Nationality	Occupation
Telephone Numbers	Home:	Work:	Mobile:
Resident Status: Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/>			

Identification: (Valid Picture ID required)

National ID <input type="checkbox"/>	Passport <input type="checkbox"/>	Driver's Licence <input type="checkbox"/>	Other <input type="checkbox"/>	Identification details:
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Description / Nature of Business Transaction:				
Deposit <input type="checkbox"/>	Wire Transfer <input type="checkbox"/>	Currency exchange <input type="checkbox"/>	Monetary Instrument <input type="checkbox"/>	Other <input type="checkbox"/> (specify)

Amount and Currency

FINANCIAL INSTITUTIONS ARE REQUIRED BY LAW TO VERIFY THE SOURCE OF FUNDS BEING DEPOSITED BEFORE ACCEPTING DEPOSITS AND TO DISCLOSE SUCH INFORMATION TO LAW ENFORCEMENT AUTHORITIES IF REQUIRED. THE MAKING OF A FALSE DECLARATION AS TO THE SOURCE OF FUNDS CONSTITUTES AN OFFENCE UNDER SECTION 21 (2) OF THE MONEY LAUNDERING (PREVENTION) ACT 2010. I DECLARE THAT THE SOURCE OF FUNDS IS: (Show supporting evidence, eg. Receipt, invoice, title deeds etc)

Transaction Approved: Yes <input type="checkbox"/> No <input type="checkbox"/> (If no state reason)

Depositor's Signature:	Transaction taken by: (signature and title)	Witness
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