

RAHSIA



**BANK NEGARA MALAYSIA**  
CENTRAL BANK OF MALAYSIA

Please send completed form to:  
Financial Intelligence & Enforcement Department  
Bank Negara Malaysia  
Jalan Dato' Onn, 50480 Kuala Lumpur  
Fax: 03-2693 3625 E-mail: [str@bnm.gov.my](mailto:str@bnm.gov.my)

Reference No: \_\_\_\_\_  
CO No: \_\_\_\_\_

## SUSPICIOUS TRANSACTION REPORT

### FOR LICENSED CASINO

- a. This report is made pursuant to the requirement to report suspicious transaction under the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001 (AMLA)
- b. Under section 24 of the AMLA, no civil, criminal or disciplinary proceedings shall be brought against a person who makes a report unless it was made in bad faith

### PART A: INFORMATION ON CUSTOMER

#### Account Holder

1)

Nationality	<input type="text"/>		
Name	<input type="text"/>		
Other/previous name	(1)	<input type="text"/>	
	(2)	<input type="text"/>	
	(3)	<input type="text"/>	
New NRIC no	<input type="text"/>	Old NRIC no	<input type="text"/>
Other identification	<input type="text"/>	Other identification type	<input type="text"/>
Gender	<input type="text"/>		

#### Contact information

Residential/Business Address	Correspondence Address
<input type="text"/>	<input type="text"/>
Other Address	Previous Address
<input type="text"/>	<input type="text"/>

Email address:

Contact No.  -(Off)  -(Res)  -(Mob)

Fax No.

**Employment information**

Business/employment type

Occupation

Occupation description

Employer name

Employment area

Other known employment

**Marital Information**

Marital status

Spouse name

**Spouse identification**

New NRIC no  Old NRIC no

Other identification  Other identification type

Passport no  Place/country of issue

Relationship with casino

Customer

Agent

Junket/Tour Operator

Employee

Cheque cashing operator

Others (specify):

**PART B: TRANSACTION DETAILS**

Attempted but not completed transaction	<input type="checkbox"/>		
Membership no	<input type="text"/>	Membership type	<input type="text"/>
Date joined	<input type="text"/>		
Transaction date	<input type="text"/>		
Transaction amount (MYR)	<input type="text"/>		
Foreign currency amount	<input type="text"/>	Currency type	<input type="text"/>

**PART C: DESCRIPTION OF SUSPICIOUS TRANSACTION**

Grounds for suspicion	<input type="checkbox"/> Counterfeit/fraudulent
	<input type="checkbox"/> Large/frequent currency exchange
	<input type="checkbox"/> Large transaction with minimal gambling
	<input type="checkbox"/> Use of different monetary instrument
	<input type="checkbox"/> Use of multiple credits or deposit account
	<input type="checkbox"/> Unusual use or wire transfer
	<input type="checkbox"/> Activity inconsistent with customer profile
	<input type="checkbox"/> Others (please specify)
Description of suspected criminal activity	<input type="text"/>
Details of the nature and circumstances surrounding it	<input type="text"/>
Date of reporting	<input type="text"/>