

## Nature of STR

**Attempted but not completed \*** *Do RIs attempt to submit STR but does not have complete info?  
If YES, only fill 'Basis of Suspicion'. Other field like customer information , banking field, etc are optional.  
If NO, all fields are mandatory*

**STR is reported due to \***

**Please state relevant source \***

## Basis of Suspicion

**Suspected Predicate Offence \***

**Red flag indicator \***

**Description of transaction pattern and entities connected to the suspicious activities. Max 20,000 characters. ... \***

**Details and reasons to support basis of suspicion. Max 20,000 characters. \***

**Actions taken by reporting institution \***

**Related to Politically Exposed Persons (PEPs) \***

**Description of relationship with PEPs**

**Keywords related to the report**

## Customer Information

Business/Company Name \*

Other Name/Previous Name

Country of Incorporation \*

Business Registration Number \*

Other Registration Number

Date of Incorporation \* *Please click the drop down below for date selection*

Business Address \*

Postcode e.g. 50480

Correspondence Address *Only fill in if the correspondence address is not same as residential address*

Postcode e.g. 50480

Email Address

Contact No (Office) \*

Phone No

Customer AML Risk Rating

**Nature of Business \*** *Please fill in the sector in "others" if not in the list given. e.g. Others: [Forestry]*

**Signatory/Director/Beneficial Owner**

**Role \***

**Title**

**Name \***

**Other Name/Alias**

**Gender \***

**Nationality \***

**Identification No (NRIC) \*** *e.g. 780101141234*

**Identification No (Passport)** *Non-mandatory field if customer is Malaysian. Mandatory if they are foreigner*

**Other ID**

**Date of Birth \*** *Please click the dropdown below for date selection.*

**Residential Address \***



*Postcode e.g. 50480*



**Correspondence Address** *Only fill in if the correspondence address is not same as residential address*



Spouse Date of Birth

**Account Details**

Account No \*

Account Type \*

Account Status \*

Home Branch \*

Date Account Opened \* *Please click the drop down below for date selection*

Current Balance (RM) \*

Date Account Closed \* *Please click the drop down below for date selection*

Account Closed by \*

Reason of Closure \*

**Introducer/Guarantor**

Title

Name

Other Name/Alias

Gender *Field is onlyrequired if RIs filled 'Name of Introducer/Guarantor'*

Nationality/Country of Incorporation *Field is onlyrequired if RIs filled 'Name of Introducer/Guarantor'*

Identification No (NRIC) *Field is onlyrequired if RIs filled 'Name of Introducer/Guarantor'*

Identification No (Passport) *Field is onlyrequired if RIs filled 'Name of Introducer/Guarantor'*


Other ID

Date of Birth/Incorporation *Field is onlyrequired if RIs filled 'Name of Introducer/Guarantor'*


Email Address

Contact No *Field is onlyrequired if RIs filled 'Name of Introducer/Guarantor'*


Phone No

## Key Suspicious Transactions Details

Type of Transaction \*

Method of Transaction

Transaction Date \* *Please click the drop down below for date selection*

|      |   |    |
|------|---|----|
| From | - | To |
|------|---|----|

Counterparty Name

Counterparty FI

Counterparty Account No

**Transaction Amount (RM) \*****Transaction Currency****Transaction Amount (FC)** *Only required if transaction was done not using MYR***Purpose of Transaction****IP Address & Location****Transaction Outlet****Title****Name of Person Conducting Transaction****Other Name/Alias****Gender** *Field is only required if RIs filled 'Name of Person Conducting Transaction'***Nationality** *Field is only required if RIs filled 'Name of Person Conducting Transaction'***Identification No (NRIC)** *e.g. 780101141234 Field is only required if RIs filled 'Name of Person Conducting Transaction'***Identification No (Passport)** *Field is only required if RIs filled 'Name of Person Conducting Transaction'***Other ID****Date of Birth** *Field is only required if RIs filled 'Name of Person Conducting Transaction'*

**Address** *Field is only required if RIs filled 'Name of Person Conducting Transaction'*

|         |                     |
|---------|---------------------|
| Address |                     |
| Town    | Postcode e.g. 50480 |
|         |                     |

**Correspondence Address** *Only fill in if the correspondence address is not same as residential address*

|         |                     |
|---------|---------------------|
| Address |                     |
| Town    | Postcode e.g. 50480 |
|         |                     |

**Email Address**

|  |
|--|
|  |
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**Contact No** *Field is only required if RIs filled 'Name of Person Conducting Transaction'*

|  |          |
|--|----------|
|  | Phone No |
|--|----------|

**Occupation** *Please fill in the occupation in "others" if not in the list given. e.g. Others: [Doctor]*

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**Relationship with Customer/Accountholder** *Please fill in the relationship in "others" if not in the list given. e.g. Others: [Parents]*

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**Other Facilities Maintained by Accountholder****Type of Facility**

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**Account No**

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**Name(s) of Accountholder \***

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**NRIC/BRIC of Accountholder \***

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**Status of Account**

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**Date Opened** *Please click the drop down below for date selection*

**Date Closed** \* *Please click the drop down below for date selection*

**Current Balance**