Nature of STR

Attempted but not completed

Please select from this dropdown list

STR is reported due to

Please select from this dropdown list

Please state relevant source

Please select from this dropdown list

Basis of Suspicion

Suspected Predicate Offence

Please select from this dropdown list

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.

Related to Politically Exposed Persons (PEPs)

Please select from this dropdown list

Description of relationship with PEPs

Keywords related to the report

Customer Information

Business/Company Name

Other Name/Previous Name

Country of Incorporation

Please select country from this dropdown list

Business Registration Number

Other Registration Number

Date of Incorporation

Business Address

Address

Town

Postcode e.g. 50480

Please select state from this dropdown list | Please select country from this dropdown list

Correspondence Address

Address

Town | *Postcode e.g. 50480*

Please select state from this dropdown list | Please select country from this dropdown list

Email Address

Contact No (Office)

Please select country calling code from this dropdown lis | *Phone No*

Customer AML Risk Rating

Please select from this dropdown list

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

Please select from this dropdown list

Signatory/Director/Beneficial Owner

Role

Please select from this dropdown list

Title

Please select from this dropdown list

Name

Other Name/Alias

Gender

Please select from this dropdown list

Nationality

Please select country from this dropdown list

Identification No (NRIC)

Identification No (Passport)

Other ID

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

Residential Address

Address

Town | *Postcode e.g. 50480*

Please select state from this dropdown list | Please select country from this dropdown list

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

Address

Town | *Postcode e.g. 50480*

Please select state from this dropdown list | Please select country from this dropdown list

Email Address

Contact No

Please select country calling code from this dropdown lis | Phone No

Customer AML Risk Rating

Please select from this dropdown list

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

Please select from this dropdown list

Occupation Description

Employer Name

Employment Sector *Please fill in the sector in "others" if not in the list given. e.g. Others: [Forestry]*

Please select from this dropdown list

Annual Income Range (RM)

Please select from this dropdown list

Marital Status

Please select from this dropdown list

Spouse Name

Spouse Nationality

Please select country from this dropdown list

Spouse ID No (NRIC) *e.g. 780101141234*

Spouse ID No (Passport)

Spouse Other ID

Spouse Date of Birth

Banking Account Information

Bank Name

Bank Account No

Bank Account Type

Please select from this dropdown list

Home Branch

Key Suspicious Transactions Details

Winning Ticket Number(s)

Transaction Date

From - *To*

Winning Amount (RM)

Payout Method

Please select from this dropdown list

Title

Please select from this dropdown list

Name of Person Conducting Transaction

Other Name/Alias

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

Please select from this dropdown list

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

Please select country from this dropdown list

Identification No (NRIC) *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*

Please select state from this dropdown list | Please select country from this dropdown list

Correspondence Address

Address

Town | *Postcode e.g. 50480*

Please select state from this dropdown list | Please select country from this dropdown list

Email Address

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

Please select country calling code from this dropdown lis | *Phone No*

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

Please select from this dropdown list

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

Please select from this dropdown list

Relationship with Outlet

Date of first winning * *Please select the dropdown menu below for date selection*

Total number of winnings throughout relationship *

Total amount of winnings throughout relationship (RM) *