



Terrorist Funds Report

(Law n°112/AN/11/6ème L completing law n°196/AN/02/4ème L on Money Laundering, Confiscation and International Cooperation regarding the Proceed of Crime.)

You must use this form if you are a reporting entity and that you have grounds to suspect that funds belong or are controlled directly or indirectly by a person or terrorist group. If you would like to have more information on how to fill out the form, please contact the Financial Intelligence Service at +253 21 35 27 51.

Report can be send or deliver to :

Financial Intelligence Service
Central Bank of Djibouti
P.O Box: 2118
Djibouti
Republic of Djibouti

SECTION 1 PREVIOUS REPORT

1. Is this report correcting or completing a previous report?

Yes

No

If yes, please provide details on the report such as confirmation number, date of sending etc.

SECTION 2 REPORTING ENTITY

2. Entity Name

3. Address

4. Phone Number

Fax

5. E-mail Address

SECTION 3 AML/CFT CORRESPONDENT

6. Name

7. Position

8. Phone Number

Fax

9. E-mail Address

Note: Please copy this page for each type of funds that you report.

Operation n°

Funds n°

SECTION 4 OPERATION DESCRIPTION

10. Type of fund

11. Date of the operation

Location

12. Account Number

13. Account Date opened

14. Amount

15. Currency

16. Countries involved

17. Other details on the operation

SECTION 5 OPERATION STATUS

18. Status of the Funds

19. Please detail the status if necessary

Note: Please copy this page for each person that you report.

Person n°

SECTION 6 INFORMATION ABOUT THE INDIVIDUAL OR ENTITY REPORTED

A) Individual

20. Name

21. Date and Place of Birth

22. Citizenship

23. Reporting Entity Client Number

24. Type and number of the ID

25. Country that issued the ID

26. Occupation

27. Address and country of residence

28. Phone Number

Fax

B) Entity

29. Name of the group

30. Registered Address and Residence
Country

31. Phone Number

Fax

32. E-mail Address

33. Date of the beginning of the business
relationship

34. Other Legal person and/or legal entity involved (Identity, address, Employment...) :

Note: Please copy this page if you need more space.

Page n°

SECTION 7 REASONS OF THE REPORT

35. Please detailed all indicators that led you to determine that the funds belong or are controlled by a person or terrorist group.

SECTION 8 ACTIONS TAKEN

36. Please detailed all actions that you have taken since you have detected of the terrorist funds.

SECTION 9 SIGNATURE



Please insure that all relevant information as well as relevant documents are included.

Done at

On

Correspondent Signature