



SOURCE OF FUNDS DECLARATION FORM

To be completed for cash deposits of \$20,000.00 and over, cheque deposits of \$50,000.00 and over and wire transfer of \$6,000.00 and over.

PLEASE COMPLETE IN CAPITAL LETTERS WITH BLACK OR BLUE INK ONLY.

MEMBER ACCOUNT INFORMATION																																																			
BRANCH				TRANSACTION DATE	DD/MM/YYYY	MEMBER NO:																																													
ACCOUNT TYPE	SHARE <input type="radio"/>	SHARE DEPOSIT <input type="radio"/>	LOAN <input type="radio"/>	LINCU <input type="radio"/>	CURRENCY	AMOUNT \$																																													
MEMBER INFORMATION:																																																			
MEMBER NAME: _____																																																			
MEMBER ADDRESS: _____																																																			
IDENTIFICATION NO: _____				NATIONALITY: _____																																															
DATE OF BIRTH: _____				COUNTRY OF BIRTH: _____																																															
				<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>RESIDENT</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>OTHER</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>PEP</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </table>				YES	NO	RESIDENT	<input type="radio"/>	<input type="radio"/>	OTHER	<input type="radio"/>	<input type="radio"/>	PEP	<input type="radio"/>	<input type="radio"/>																																	
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OTHER	<input type="radio"/>	<input type="radio"/>																																																	
PEP	<input type="radio"/>	<input type="radio"/>																																																	
OCCUPATION: _____																																																			
NAME OF EMPLOYER/BUSINESS: _____																																																			
SELF EMPLOYED:	YES <input type="radio"/>	NO <input type="radio"/>	NATURE OF BUSINESS: _____																																																
TELEPHONE NO. (H) _____ (W) _____ (M) _____ (M) _____																																																			
NAME OF DEPOSITOR (If different from Member):																																																			
NAME: _____				DATE OF BIRTH: _____																																															
				DD/MM/YYYY																																															
ADDRESS: _____																																																			
IDENTIFICATION NO. _____		PHONE NO.(H) _____		(W) _____																																															
				(M) _____																																															
RELATIONSHIP TO MEMBER: _____																																																			
TRANSACTION DETAILS:																																																			
CASH	\$	\$100 x	\$50 x	\$20 x	\$10 x	\$5 x	\$1 x	Coins																																											
CHEQUE	\$	CHEQUE NO.:		SOURCE:																																															
WIRE TRANSFER	\$	SOURCE:																																																	
DECLARATION OF SOURCE OF FUNDS:																																																			
I declare that the source of funds for this transaction is*:																																																			
Savings	<input type="radio"/>	Sou Sou	<input type="radio"/>	Proceeds from Self Owned Business	<input type="radio"/>	Salary	<input type="radio"/>																																												
Gift/Inheritance	<input type="radio"/>	Sale of Vehicle	<input type="radio"/>	Retirement Funds/Gratuity	<input type="radio"/>	Employment Bonus	<input type="radio"/>																																												
Insurance Settlement	<input type="radio"/>	Sale of Property	<input type="radio"/>	From Investments	<input type="radio"/>	Other	<input type="radio"/>																																												
*Details: _____																																																			

<small>Pursuant to Regulation 15 (1) (h) of the Financial Obligations Regulations 2010, as amended, TECU Credit Union is required to obtain information on the source of funds for this transaction.</small>																																																			
MEMBER'S SIGNATURE _____			DEPOSITOR'S SIGNATURE _____			DD/MM/YYYY																																													
FOR OFFICIAL USE ONLY																																																			
Transaction Accepted <input type="radio"/>		Transaction Declined <input type="radio"/>		Member Refused to Sign <input type="radio"/>		Other <input type="radio"/>																																													
Processed By: _____																																																			
PRINT NAME		SIGNATURE			DD/MM/YYYY																																														
Authorised By: _____																																																			
PRINT NAME		SIGNATURE			DD/MM/YYYY																																														
Reviewed By: _____																																																			
PRINT NAME		SIGNATURE			DD/MM/YYYY																																														
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 10%; text-align: center;">YES</td> <td style="width: 10%; text-align: center;">NO</td> </tr> <tr> <td>UN 1267 ISIL (Da'esh) & Al-Qaida Sanctions List Checked</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>Positive Match</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td colspan="3"> </td> </tr> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>TT Consolidated List of Court Orders Checked</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>Positive Match</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td colspan="3"> </td> </tr> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>UN 2231 List on Iran Nuclear Issue Checked</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>Positive Match</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td colspan="3"> </td> </tr> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>UN 1718 Sanctions List Materials (DPRK) Checked</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>Positive Match</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </table>								YES	NO	UN 1267 ISIL (Da'esh) & Al-Qaida Sanctions List Checked	<input type="radio"/>	<input type="radio"/>	Positive Match	<input type="radio"/>	<input type="radio"/>					YES	NO	TT Consolidated List of Court Orders Checked	<input type="radio"/>	<input type="radio"/>	Positive Match	<input type="radio"/>	<input type="radio"/>					YES	NO	UN 2231 List on Iran Nuclear Issue Checked	<input type="radio"/>	<input type="radio"/>	Positive Match	<input type="radio"/>	<input type="radio"/>					YES	NO	UN 1718 Sanctions List Materials (DPRK) Checked	<input type="radio"/>	<input type="radio"/>	Positive Match	<input type="radio"/>	<input type="radio"/>
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