

Suspicious Activity Report Form OFR-U-SAR

Incorporated by Reference in Rule 69U-100.005, F.A.C.

File this report by submitting it electronically to the Director of the Division of Financial Institutions, Florida Office of Financial Regulation at: OFRFinancialInstitutions@flofr.com

Type of Filing

1 Check all that apply.

- a. Initial report b. Correct/Amend prior report c. Continuing activity report d. Joint report
 e. If items 1b or 1c are checked, list the filing date of the prior report: _____

Part I

Subject Information

2 Check: a if entity, b if all critical subject information is unavail (does not include item 24).

3 Individual's last name or entity's legal name a. Unk <input type="checkbox"/>		4 First name a. Unk <input type="checkbox"/>		5 Middle initial	
5a Gender b. Male <input type="checkbox"/> c. Fem. <input type="checkbox"/> d. Unk <input type="checkbox"/>		6 Alternate name, e.g., AKA - individual or DBA - entity		7 Occupation or type of business	
8 Address a. Unk <input type="checkbox"/>		9 City a. Unk <input type="checkbox"/>		10 State a. Unk <input type="checkbox"/>	
11 ZIP/Postal Code a. Unk <input type="checkbox"/>		*12 Country code a. Unk <input type="checkbox"/>		13 TIN a. Unk <input type="checkbox"/>	
14 TIN type *(If 13 is known) a <input type="checkbox"/> EIN b <input type="checkbox"/> SSN-ITIN c <input type="checkbox"/> Foreign		15 Form of identification for subject: a. Unk <input type="checkbox"/> b <input type="checkbox"/> Driver's license/state ID c <input type="checkbox"/> Passport d <input type="checkbox"/> Alien registration z <input type="checkbox"/> Other _____ e Number _____ f Issuing State _____ g Country _____			
16 Date of birth a. Unk <input type="checkbox"/> MM / DD / YYYY		17 Phone number - Type a <input type="checkbox"/> Home b <input type="checkbox"/> Work c <input type="checkbox"/> Mobile d <input type="checkbox"/> Fax		18 Phone number 18a Ext. (If any)	
19 E-mail address (If available)		19a Website (URL) address (If available)		20 Corroborative statement to filer? a <input type="checkbox"/> Yes b <input type="checkbox"/> No	
21 Relationship of the subject to an institution listed in Part III or IV (check all that apply) b <input type="checkbox"/> Accountant c <input type="checkbox"/> Agent d <input type="checkbox"/> Appraiser e <input type="checkbox"/> Attorney f <input type="checkbox"/> Borrower g <input type="checkbox"/> Customer h <input type="checkbox"/> Director i <input type="checkbox"/> Employee j <input type="checkbox"/> No relationship to institution k <input type="checkbox"/> Officer l <input type="checkbox"/> Owner or Controlling Shareholder z <input type="checkbox"/> Other _____		21a Institution TIN _____			
22 If item 21h, i, k, or l is checked, indicate status of relationship a <input type="checkbox"/> Relationship continues b <input type="checkbox"/> Terminated c <input type="checkbox"/> Suspended /barred d <input type="checkbox"/> Resigned				23 Action date if 22 b, c, or d is checked MM / DD / YYYY	
24 Financial inst. TIN and acct. number(s) affected that are related to subject, if any. Check "Yes" if closed. c. TIN _____ d. acct # _____ e. Yes <input type="checkbox"/> f. acct # _____ g. Yes <input type="checkbox"/> h. TIN _____ i. acct # _____ j. Yes <input type="checkbox"/> k. acct # _____ l. Yes <input type="checkbox"/>		a. No known acct. involved <input type="checkbox"/> b. Non-US Fin. Inst. <input type="checkbox"/>			
25 Subject's role in suspicious activity (If applicable) a <input type="checkbox"/> Purchaser/Sender b <input type="checkbox"/> Payee/Receiver c <input type="checkbox"/> Both a & b					

Part II

Suspicious Activity Information

*27 Date or date range of suspicious activity for this report a. From: MM / DD / YYYY b. To: MM / DD / YYYY		26 Amount involved in this report a <input type="checkbox"/> Amt. unk. b <input type="checkbox"/> No amt. involved \$ _____ .00	
28 Cumulative amount only if box 1c is checked \$ _____ .00		29. Structuring a. <input type="checkbox"/> Alters transaction to avoid BSA recordkeeping requirement b. <input type="checkbox"/> Alters transaction to avoid CTR requirement c. <input type="checkbox"/> Customer cancels transaction to avoid BSA reporting and recordkeeping requirements d. <input type="checkbox"/> Multiple transactions below BSA recordkeeping threshold e. <input type="checkbox"/> Multiple transactions below CTR threshold f. <input type="checkbox"/> Suspicious inquiry by customer regarding BSA reporting or recordkeeping requirements z. <input type="checkbox"/> Other: _____	
30. Terrorist Financing a. <input type="checkbox"/> Known or suspected terrorist/terrorist organization z. <input type="checkbox"/> Other: _____		31. Fraud (Type) a. <input type="checkbox"/> ACH g. <input type="checkbox"/> Mail b. <input type="checkbox"/> Business loan h. <input type="checkbox"/> Mass-marketing c. <input type="checkbox"/> Check i. <input type="checkbox"/> Pyramid scheme d. <input type="checkbox"/> Consumer loan j. <input type="checkbox"/> Wire e. <input type="checkbox"/> Credit/Debit card z. <input type="checkbox"/> Other f. <input type="checkbox"/> Healthcare	

32. Casinos

- a. Inquiry about end of business day
- b. Minimal gaming with large transactions
- c. Suspicious intra-casino funds transfers
- d. Suspicious use of counter checks or markers
- z. Other: _____

34. Identification / Documentation

- a. Changes spelling or arrangement of name
- b. Multiple individuals with same or similar identities
- c. Provided questionable or false documentation
- d. Refused or avoided request for documentation
- e. Single individual with multiple identities
- z. Other: _____

35. Other suspicious activities

- a. Account takeover
- b. Bribery or gratuity
- c. Counterfeit instruments
- d. Elder financial exploitation
- e. Embezzlement/theft/disappearance of funds
- f. Forgeries
- g. Identity theft
- h. Little or no concern for product performance penalties, fees, or tax consequences
- i. Misuse of "free look"/cooling-off/right of rescission
- j. Misuse of position or self-dealing
- k. Suspected public/private corruption (domestic)
- l. Suspected public/private corruption (foreign)
- m. Suspicious use of informal value transfer system
- n. Suspicious use of multiple transaction locations
- o. Transaction with no apparent economic, business, or lawful purpose
- p. Two or more individuals working together
- q. Unauthorized electronic intrusion
- r. Unlicensed or unregistered MSB
- z. Other: _____

33. Money laundering

- a. Exchanges small bills for large bills or vice versa
- b. Suspicion concerning the physical condition of funds
- c. Suspicion concerning the source of funds
- d. Suspicious designation of beneficiaries, assignees or joint owners
- e. Suspicious EFT/wire transfers
- f. Suspicious exchange of currencies
- g. Suspicious receipt of government payments/benefits
- h. Suspicious use of multiple accounts
- i. Suspicious use of noncash monetary instruments
- j. Suspicious use of third-party transactors (straw-man)
- k. Trade Based Money Laundering/Black Market Peso Exchange
- l. Transaction out of pattern for customer(s)
- z. Other: _____

36. Insurance

- a. Excessive insurance
- b. Excessive or unusual cash borrowing against policy/annuity
- c. Proceeds sent to or received from unrelated third party
- d. Suspicious life settlement sales insurance (e.g., STOLI's, Viaticals)
- e. Suspicious termination of policy or contract
- f. Unclear or no insurable interest
- z. Other: _____

37. Securities/Futures/Options

- a. Insider trading
- b. Market manipulation/wash trading
- c. Misappropriation
- d. Unauthorized pooling
- z. Other: _____

38. Mortgage Fraud

- a. Appraisal fraud
- b. Foreclosure fraud
- c. Loan Modification fraud
- d. Reverse mortgage fraud
- z. Other: _____

39. Were any of the following product type(s) involved in the suspicious activity? (Check all that apply)

- | | | | |
|-------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------|
| a. <input type="checkbox"/> Bonds/Notes | g. <input type="checkbox"/> Futures/Options on futures | m. <input type="checkbox"/> Options on securities | s. <input type="checkbox"/> Swap, hybrid, or other derivative |
| b. <input type="checkbox"/> Commercial mortgage | h. <input type="checkbox"/> Hedge fund | n. <input type="checkbox"/> Penny stocks/Microcap securities | z. <input type="checkbox"/> Other (List below) |
| c. <input type="checkbox"/> Commercial paper | i. <input type="checkbox"/> Home equity loan | o. <input type="checkbox"/> Prepaid access | |
| d. <input type="checkbox"/> Credit card | j. <input type="checkbox"/> Home equity line of credit | p. <input type="checkbox"/> Residential mortgage | |
| e. <input type="checkbox"/> Debit card | k. <input type="checkbox"/> Insurance/Annuity products | q. <input type="checkbox"/> Security futures products | |
| f. <input type="checkbox"/> Forex transactions | l. <input type="checkbox"/> Mutual fund | r. <input type="checkbox"/> Stocks | |

40. Were any of the following instrument type(s)/payment mechanism(s) involved in the suspicious activity? (Check all that apply)

- | | | | |
|--------------------------------------------------|------------------------------------------------|-----------------------------------------------------|------------------------------------------------|
| a. <input type="checkbox"/> Bank/Cashier's check | d. <input type="checkbox"/> Gaming instruments | g. <input type="checkbox"/> Personal/Business check | z. <input type="checkbox"/> Other (List below) |
| b. <input type="checkbox"/> Foreign currency | e. <input type="checkbox"/> Government payment | h. <input type="checkbox"/> Travelers checks | |
| c. <input type="checkbox"/> Funds transfer | f. <input type="checkbox"/> Money orders | i. <input type="checkbox"/> U.S. Currency | |

41 Commodity type (If applicable)	42 Product/Instrument description (If needed)	43 Market where traded (Three to five letter code)	
44 IP address (If available)	45 CUSIP® number	46 CUSIP® number	

Part III Information about Financial Institution Where Activity Occurred

3

47 Type of financial Institution (check only one)			a <input type="checkbox"/> Casino/Card Club			b <input type="checkbox"/> Depository institution			c <input type="checkbox"/> Insurance company			48 Primary Federal regulator			
			d <input type="checkbox"/> MSB			e <input type="checkbox"/> Securities/Futures			z <input type="checkbox"/> Other _____						
49 If item 47a is checked indicate type (Check only one)															
a <input type="checkbox"/> State licensed casino			b <input type="checkbox"/> Tribal authorized casino			c <input type="checkbox"/> Card club			z <input type="checkbox"/> Other(specify) _____						
50 If item 47e is checked, indicate type of Securities and Futures institution or ind. where activity occurred - Check box(es) that apply to this report.															
a <input type="checkbox"/> Clearing broker-securities			d <input type="checkbox"/> Introducing broker-commodities			g <input type="checkbox"/> Investment company									
b <input type="checkbox"/> Futures Commission Merchant			e <input type="checkbox"/> Introducing broker-securities			h <input type="checkbox"/> Retail foreign exchange dealer									
c <input type="checkbox"/> Holding company			f <input type="checkbox"/> Investment Adviser			i <input type="checkbox"/> Subsidiary of financial/bank holding company			z <input type="checkbox"/> Other _____						
51 Financial institution identification number (Check one box to indicate type)															
a <input type="checkbox"/> CRD number			b <input type="checkbox"/> IARD number			c <input type="checkbox"/> NFA number			d <input type="checkbox"/> RSSD number			e <input type="checkbox"/> SEC number			
									f						
52 Financial institution's role in transaction (if applicable)															
a <input type="checkbox"/> Selling location			b <input type="checkbox"/> Paying location			c <input type="checkbox"/> Both a & b									
53 Legal name of financial institution															
a. Unk <input type="checkbox"/>												54 Alternate name, e.g., AKA - individual or trade name, DBA - entity			
55 TIN			a. Unk <input type="checkbox"/>			56 TIN type (If 55 is known)			a <input type="checkbox"/> EIN			b <input type="checkbox"/> SSN-ITIN			
						c <input type="checkbox"/> Foreign									
57 Address			a. Unk <input type="checkbox"/>			58 City			a. Unk <input type="checkbox"/>			59 State			
												*60 ZIP/Postal Code			
												a. Unk <input type="checkbox"/>			
61 Country (2-letter code)			a. Unk <input type="checkbox"/>			62 Internal control/file number			63 Loss to financial institution (If applicable)						
									\$.00			
64 Branch's role in transaction (if applicable)															
a <input type="checkbox"/> Selling location			b <input type="checkbox"/> Paying location			c <input type="checkbox"/> Both a & b									
65 Address of branch or office where activity occurred															
If no branch activity involved, check this box										a <input type="checkbox"/>			66 RSSD number		
67 City			68 State			69 ZIP/Postal Code			70 Country (2-letter code)						
71 Branch's role in transaction (if applicable)															
a <input type="checkbox"/> Selling location			b <input type="checkbox"/> Paying location			c <input type="checkbox"/> Both a & b									
72 Address of branch or office where activity occurred (If applicable)															
a <input type="checkbox"/> Check if additional branch addresses are listed in Part V										73 RSSD number					
74 City			75 State			76 ZIP/Postal Code			77 Country (2-letter code)						

Part IV Filing Institution Contact Information

79 Filer name (Holding Co., lead fin. inst., or agency, if applicable)			80 TIN			81 TIN type			a <input type="checkbox"/> EIN			b <input type="checkbox"/> SSN/ITIN		
						c <input type="checkbox"/> Foreign								
82 Type of financial Institution (check only one)														
a <input type="checkbox"/> Casino/Card Club			b <input type="checkbox"/> Depository institution			c <input type="checkbox"/> Insurance company			d <input type="checkbox"/> MSB			e <input type="checkbox"/> Securities/Futures		
									z <input type="checkbox"/> Other _____					
83 Type of Securities and Futures institution or individual filing this report - Check box(es) for functions that apply to this report														
a <input type="checkbox"/> Clearing broker-securities			f <input type="checkbox"/> Introducing broker-securities			j <input type="checkbox"/> SRO Futures								
b <input type="checkbox"/> CPO/CTA			g <input type="checkbox"/> Investment Adviser			k <input type="checkbox"/> SRO Securities								
c <input type="checkbox"/> Futures Commission Merchant			h <input type="checkbox"/> Investment company			l <input type="checkbox"/> Subsidiary of financial/bank holding company								
d <input type="checkbox"/> Holding company			i <input type="checkbox"/> Retail foreign exchange dealer			z <input type="checkbox"/> Other _____								
e <input type="checkbox"/> Introducing broker-commodities														
84 Financial institution identification number (Check one box to indicate type)														
a <input type="checkbox"/> CRD number			b <input type="checkbox"/> IARD number			c <input type="checkbox"/> NFA number			d <input type="checkbox"/> RSSD number			e <input type="checkbox"/> SEC number		
									f					
85 Address			86 City			87 State			88 ZIP/Postal Code					
89 Country (2-letter code)			90 Alternate name, e.g., AKA - individual or trade name, DBA - entity			91 Internal control/file number								
92 LE contact agency			93 LE contact name			94 LE contact phone number (Include Area Code)			94a Ext. (if any)					
95 LE contact date														
MM / DD / YYYY														
96 Designated contact office			97 Designated phone number (Include Area Code)			97a Ext. (if any)			98 Date filed			MM / DD / YYYY		

