CONFIDENTIAL Report to Money Laundering Reporting Officer Reporting of Money Laundering Activity

To:[Money Laundering Reporting Officer or Deputy]
From:[insert name of employee, including post title]
Service Area:
Ext/Tel No:
Date by which response needed:
REPORTING OF CASH TRANSACTION IN EXCESS OF £4,000
Name(s) and address(s) of person(s) involved: If a company/public body please include details of nature of business
Summary of transaction and customers role: Please include full details e.g. value, source of funds, what, when, where, how. Continue on a separate sheet if necessary
REPORTING OF SUSPECTED MONEY LAUNDERING ACTIVITY:
Name(s) and address(s) of person(s) involved: If a company/public body please include details of nature of business
Summary of transaction and customers role:
Please include full details e.g. value, source of funds, what, when, where, how. Continue on a separate sheet if necessary
Passan for augniciona regarding augh activity
Reason for suspicions regarding such activity:

	Has any investigation been undertaken (as far as you are aware)? Yes/No If yes, please include details below:
	Have you discussed your suspicions with anyone else? Yes/No
	If yes, please specify below, explaining why such discussion was necessary:
[Have you consulted any supervisory body guidance re money laundering? (e.g. National Crime
	Agency, The Law Society) Yes / No
	If yes, please specify:
1	Do you feel there is a reasonable excuse for the Money Laundering Reporting Officer to not
	disclose the matter to the NCA? (eg are you a lawyer and wish to claim legal professional privilege? Yes/No
	Please set out below any other information you feel is relevant:
	Signed:

THE FOLLOWING PART OF THIS FORM IS FOR COMPLETION BY THE MLRO

Date Report Received:
CONSIDERATION:
Action Plan:
OUTCOME OF CONSIDERATION:
Are there reasonable grounds for suspecting money laundering activity?
Yes/No
If there are reasonable grounds for suspicion, will a report be made to the National Crime
Agency (NCA)? Yes/No
If yes, please confirm date of report to NCA: [Please complete the details below]
Details of liaison with the NCA regarding the report:
Name of liaison person
Notice Period: to
Moratorium Period: to
Is consent required from the NCA to any on-going or imminent transactions which would otherwise be prohibited acts?
Yes/ No If yes, please confirm full details below:
in yes, pieuse commin rum detaile selew.
Date consent received from NOA:
Date consent received from NCA:
Date consent given by you to employee:

the matter to the NCA, please set out below the reason(s) for non-disclosure: [Please set out any reasonable excuse for non-disclosure]
Date consent given by you to employee for any prohibited act transactions to proceed:
Signed: Dated:

THIS REPORT TO BE RETAINED FOR AT LEAST FIVE YEARS