

# Large Cash Transaction Report

Send completed form by mail: FINTRAC, Section A, 234 Laurier Avenue West, 24th Floor, Ottawa, Ontario K1P 1H7  
or send completed form by fax: 1-866-226-2346

Use this form if you are a reporting person or entity and you have to report a large cash transaction to FINTRAC. A large cash transaction is the receipt of an amount of \$10,000 or more in cash in the course of a single transaction. A large cash transaction also includes the receipt of two or more cash amounts of less than \$10,000 made by or on behalf of the same person or entity within 24 consecutive hours of each other that total \$10,000 or more.

For more information about this or about who is considered a reporting person or entity and for instructions on how to complete this form, see *Guideline 7: Submitting Large Cash Transaction Reports to FINTRAC* or call FINTRAC's toll-free enquiries line at 1-866-346-8722.

**If you have the capability to report electronically, DO NOT use this paper form.**  
**Refer to the reporting section of FINTRAC's Web site — <http://www.fintrac.gc.ca>**

Is this Report a correction to a Report previously submitted?

**NO**       **YES** • Enter the original Report's Date and Time

Date              Time

COMPLETE PART A – whether the information has changed or not  
 Provide the new information ONLY for the affected fields in Part B through Part G  
 If removing information from a field, strike a line through the field

**REPORTING DATE**              **TIME**

All fields of the report marked with an asterisk (\*) must be completed. The ones that are also marked "where applicable" must be completed if they are applicable to you *or* the transaction being reported. For all other fields, you have to make reasonable efforts to get the information.

## PART A — Information about where transaction took place

### Where did the transaction take place?

1. Reporting person or entity's identifier number\* (where applicable)

2. Reporting person or entity's full name\*

3. Street address\*

4. City\*

5. Province\*

6. Postal code\*

### Whom can FINTRAC contact about this report?

7. Contact – Surname\*       8. Contact – Given name\*       9. Contact – Initial/Other

10. Contact – Phone number (with area code)\*       10a. Contact – Phone extension number

### 11. Which one of the following types of reporting persons or entities best describes you?\*

**A** Accountant       **E** Casino       **J** Life Insurance Broker or Agent       **M** Provincial Savings Office  
 **B** Bank       **F** Co-op Credit Society       **K** Life Insurance Company       **N** Real Estate Broker or Sales Representative  
 **C** Caisse Populaire       **G** Credit Unions       **L** Money Services Business       **O** Securities Dealer  
 **D** Canada Post       **H** Foreign Exchange Dealer       **P** Trust & Loan Company

**NOTE: Please copy this page for each additional, related, large cash transaction (if required).**

**PART B1 — Information about the transaction(s)**

Transaction  of

1. Date of transaction\*

YEAR MONTH DAY

or

3. Night deposit indicator\*

2. Time of transaction

HOUR MINUTE

4. Date of posting (if different from date of transaction)

YEAR MONTH DAY

3a. Quick drop indicator

5. Amount of transaction\*

6. Currency code\* (where applicable) — Enter CAD if Canadian dollars or USD for United States dollars. If another type of currency is involved, see Appendix 1 in *Guideline 3: Submitting Reports to FINTRAC*.

7. How was the transaction conducted?\*

**A** In-branch/Office

**C** Armoured car

**E** Mail deposit

**G** Other

**B** ABM

**D** Courier

**F** Phone

DESCRIPTION (OTHER)



**NOTE: Please copy this page for each additional, related, disposition (per transaction) (if required).**

Transaction  Disposition  of

**PART B2 — Information about the transaction disposition(s) (how the transaction was completed, i.e., where the money went)**

Indicate whether this transaction was conducted on behalf of anyone other than the individual who conducted it. If not, indicate "not applicable".

**On behalf of:**  not applicable  **An entity (other than an individual)** (also complete PART F)  **Another Individual** (also complete PART G)  **Employee depositing cash in employer's account**

8. Disposition of funds\*

|   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> <b>A Deposit</b>                   | <input type="checkbox"/> <b>E Bank draft</b>            | <input type="checkbox"/> <b>I Securities</b>  | <input type="checkbox"/> <b>K Cash</b>  |
| <input type="checkbox"/> <b>B Electronic funds transfer</b> | <input type="checkbox"/> <b>F Money order</b>           | <input type="checkbox"/> <b>J Real estate</b> | <input type="checkbox"/> <b>L Other</b> |
| <input type="checkbox"/> <b>C Currency exchange</b>         | <input type="checkbox"/> <b>G Traveller's cheques</b>   | <input type="text"/> DESCRIPTION (OTHER)      |   |
| <input type="checkbox"/> <b>D Casino chips</b>              | <input type="checkbox"/> <b>H Life insurance policy</b> |   |   |
|   |   | <input type="text"/> POLICY NUMBER            |   |

9. Amount of disposition\*

10. Currency code\* (where applicable) — Enter CAD if Canadian dollars or USD for United States dollars. If another type of currency is involved, see Appendix 1 in *Guideline 3: Submitting Reports to FINTRAC*.

**Additional information about the funds described in field 8 above**

11. Other institution, entity or person name and number\* (where applicable)

12. Other institution, entity or person account number or policy number\* (where applicable)



**NOTE: Please copy this page for each additional disposition (if applicable).**

**PART C — Account information, if the transaction involved an account**

Disposition  Transaction  of

Complete this Part ONLY if the transaction involved an account.

1. Branch or transit number\* (where applicable)

2. Account number\* (where applicable)

3. Type of account\* (where applicable)

Personal

Business

Trust

Other

DESCRIPTION (OTHER)

4. Currency code\* (where applicable) — Enter CAD if Canadian dollars or USD for United States dollars. If another type of currency is involved, see Appendix 1 in *Guideline 3: Submitting Reports to FINTRAC*.

5. Full name of each account holder\* (where applicable)



**NOTE: Please copy this page for each additional transaction (if applicable).**

Transaction  of

**PART D — Information about individual conducting transaction if it is not a deposit into a business account (where applicable)**

If the transaction is reportable as one of multiple cash transactions of less than \$10,000 and, because of this, information for any mandatory fields in this part was not obtained at the time of the transaction (and is not available from your records), you can leave those fields blank.

1. Surname\* (where applicable)  2. Given name\* (where applicable)  3. Other/Initial (where applicable)

4. Client number assigned by reporting person or entity\* (where applicable)

5. Street address\* (where applicable)

6. City\* (where applicable)

7. Province or State\* (where applicable)  8. Country\* (where applicable)

9. Postal or Zip code\* (where applicable)

10. Country of residence

11. Home phone number (with area code)

12. Individual's identifier\* (where applicable)

A Driver's licence  B Birth certificate  C Provincial health card  D Passport  
 E Other

13. ID number (from question 12)\* (where applicable)

14. Place of issue – Province or State\* (where applicable)

15. Place of issue – Country\* (where applicable)

16. Individual's date of birth\* (where applicable)  
 YEAR  MONTH  DAY

17. Individual's occupation\* (where applicable)

18. Individual's business phone number (with area code)  18A. Phone extension number



**NOTE: Please copy this page for each additional transaction (if applicable).**

Transaction  of

**PART E — Information about individual conducting transaction if it is a deposit into a business account —  
other than a night deposit or quick drop (where applicable)**

If the transaction is reportable as one of multiple cash transactions of less than \$10,000 and, because of this, information for any mandatory fields in this part was not obtained at the time of the transaction (and is not available from your records), you can leave those fields blank.

1. Surname\* (where applicable)

2. Given name\* (where applicable)

3. Other/Initial (where applicable)



**NOTE: Please copy this page for each additional disposition (if required).**

Transaction  Disposition  of

**PART F — Information about entity on whose behalf transaction was conducted (where applicable)**

If the transaction is reportable as one of multiple cash transactions of less than \$10,000 and, because of this, information for any mandatory fields in this part was not obtained at the time of the transaction (and is not available from your records), you can leave those fields blank.

1. Name of corporation, trust or other entity\* (where applicable)

2. Type of business\* (where applicable)

3. Street address\* (where applicable)

4. City\* (where applicable)

5. Province or state\* (where applicable)

6. Country\* (where applicable)

7. Postal or Zip code\* (where applicable)

8. Business phone number (with area code)

8A. Phone extension number

9. Incorporation number\* (where applicable)

10. Place of issue – Province or State\* (where applicable)

11. Place of issue – Country\* (where applicable)

12. Individual(s) authorized with respect to the account (up to three)

A

B

C



**NOTE: Please copy this page for each additional disposition (if required).**

Transaction  Disposition  of

**PART G — Information about individual on whose behalf transaction was conducted (where applicable)**

If the transaction is reportable as one of multiple cash transactions of less than \$10,000 and, because of this, information for any mandatory fields in this part was not obtained at the time of the transaction (and is not available from your records), you can leave those fields blank.

1. Surname\* (where applicable)  2. Given name\* (where applicable)  3. Other/Initial (where applicable)

4. Street address\* (where applicable)

5. City\* (where applicable)

6. Province or State\* (where applicable)  7. Country\* (where applicable)

8. Postal or Zip code\* (where applicable)

9. Home phone number (with area code)

10. Office phone number (with area code)  10A. Phone extension number

11. Individual's date of birth  
 YEAR  MONTH  DAY

12. Individual's identifier  
 A Driver's licence  B Birth certificate  C Provincial health card  D Passport  
 E Other  DESCRIPTION (OTHER)

13. ID number (from question 12)  14. Country of residence

15. Place of issue – Province or State  16. Place of issue – Country

17. Individual's occupation

18. Relationship of the individual named in Part D or Part E to the individual named above (fields 1 to 3)

A Accountant  B Agent  C Legal counsel  D Borrower  E Broker  
 F Customer  G Employee  H Friend  I Relative  J Other  DESCRIPTION (OTHER)