

TRAVELEX TRAVELLERS CHEQUE ENCASHMENT PROCEDURE

Corporate and Business

Travelex accepts the following travellers cheques for encashment with payment made to the sender:

- a) Thomas Cook – MasterCard
- b) Interpayment - Visa
- c) Travelex – MasterCard

Please follow the instructions below:

1. Cross through each counter-signed travellers cheque and mark as void. Deface the cheque by cutting off the top left hand corner, or hole-punch each cheque.
2. Please ensure you make a note of the cheque numbers being sent or make photocopies.
3. Complete the Travelex Encashment Form on the following page and send with the original travellers cheques to:

Travellers Cheques Encashment Services Ltd
Worldwide House, Thorpe Wood
Peterborough, PE3 6SB United Kingdom

4. Payments are only available in the following currencies GBP, USD, EURO, AUD\$, CAD\$, CHF, HK\$ and ZAR. Payments are made to your permanent country of residence, if the cheques received are not in the local currency used in your country of residence, a foreign exchange rate will be used to convert the travellers cheques. All exchange rates are competed against GBP (pounds sterling). Please note no payment will be made to a third party.
5. A 5% service charge* per claim value will be deducted from the final payment.
* A minimum charge will be applied of £7 sterling equivalent, per claim value, to cover administration costs
6. For Estate Claims, please include the following items: original or certified copy of the Death Certificate and a certified copy of the Grant of Probate or Will. Please include a self addressed envelope for the return of any original or certified documents. A payment will only be made to the named executor or beneficiary of the estate.
7. If the original purchaser is unable to send in the cheques, please provide a copy of the Power of Attorney or confirmation of your entitlement to the funds. Please include a self addressed envelope for the return of any original or certified documents.
8. If a claim can not be paid the sender will receive written notification which will be sent to the Name and Address in Section 2 of the Travelex Encashment Form.
9. Travelex Contact Information:

Name: Travellers Cheques Encashment Services
Telephone No: +44 (0) 1733 279760 option 2
Email: travellerscheques@travelex.com

Corporate Accreditation 05th May 2017

Return: Travellers Cheques
Encashment Services Ltd.
WWH
Thorpe Wood
PE3 6SB



Registered office: Kings Place, 4th Floor, 90 York Way, London, United Kingdom, N1 9AG

Please answer all questions accurately. Failure to do so may result in delays or services impacted.

Section 1: Relationship Manager Details

Contact Name:		Nominated Officer / MLRO:	
Role Title:		Role Title:	
Email:		Email:	
Telephone:		Telephone:	
How large is your compliance department (Number of persons)			
Within this department how many persons are dedicated to Anti- Money Laundering and Counter Terrorist Financing?			

The above should be authorised to act on behalf of your Company- Please provide verification

Section 2: Company Information and Details

2.1	Full Legal / Registered Name		
2.2	Trading Name Used (If Different)		
2.3	Company Registered Number		
2.4	Country of Incorporation		
2.5	Date of Incorporation		
2.6	Number of Employees (Approx)		
2.7	Address of Registered Office	Building Number / Name	
		Street	
		City	
		Postcode / Zip Code	
		Country	
2.8	What is the legal form of your Company?	Private Owned Entity <input type="checkbox"/>	Public Owned Entity <input type="checkbox"/>
	If listed on a stock exchange please highlight the exchange and code	Stock Code	Exchange
2.9	Does your Company maintain a physical presence in the jurisdiction where it is authorised to operate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2.10	Does your Company / affiliate operate as a shell company?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Section 3: Regulatory Supervision / Background

3.1	Is your Company regulated for its activities by a Financial Services Regulator?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Name of Regulators	
				Number	

3.2	Is your country a member of the FATF or FSRB?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Name of FSRB (I/A)	
3.3	Is your Company subject to regulation in relation to the prevention of ML and TF?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Name of Authority	
3.4	Does your regulatory authority conduct reviews on your compliance with AML laws?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes- how often?	
3.5	What was the date of the last regulatory audit / review? Did the findings result in any fines or restrictions by any regulator/supervisor or financial sanctions by any state?				
3.6	Are you a member of any associations or trade bodies?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please provide details	

Section 4: Ultimate Beneficial Ownership & Senior Management

Please provide a list of the controllers/shareholders of your entity who own 10% or more of shares, showing the percentage ownership of each of the principal controllers/shareholders as follows. For the purpose of this questionnaire "shareholders" is any person or legal entities that, directly or indirectly, own / controls or has voting power of 10% or more of share or any class of securities of your institution. In addition please include an ownership structure chart/description (if applicable).

Entity (Legal Name)	Corporate / Natural Person	% Ownership	Country of Origin

Section 5: Senior Management

Please provide your senior management structure chart / board of director. Please provide their full name and position in your institution. Should you require more space either use the appended sheet; or detail the website where the full information can be found below:

Website:

Name	Designation (Role)

Does the Company have a legal and regulatory compliance program that includes a designated officer that is responsible for coordinating and overseeing the AML framework? Yes No

If yes please provide their details in section 1



Section 6: Anti Money Laundering / Counter Terrorist Financing Policies / Practice / Commitment

General AML Principles, Practices and Procedures

6.1	Does the Company have a written policy designed to prevent money laundering & terrorist financing?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.2	If yes is the compliance programme approved by the Companies board or senior committee?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.3	Does the Company document its procedures, ensuring compliance with AML / CTF regulations?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.4	Does the Company periodically audit its AML/CTF Policies and Procedures to ensure that they meet the required standards and are relevant?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	If YES please detail the frequency and whether it is an internal / external function				
6.5	Does the Company report suspicious transactions to the FIU and has developed written processes which are in place to prevent and detect the above?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.6	Does the Company have a policy prohibiting relationships with Shell Banks / anonymous customers?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.7	Does the Company have policies to reasonable ensure that they will not conduct transactions with or on behalf of shell banks through any of its products?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.8	Does the Company have a policy in place to deal with Politically Exposed Persons?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.9	Does the Company record customer/transaction information in compliance with Applicable laws?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Know your Customer, Due Diligence and Enhanced Due Diligence for Cheques to be Encashed

6.10	Does the Company have procedures to establish a record for each new customer noting their respective identification documents and "Know your customer" information?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.11	Does the Company verify the identity of their customers on whose behalf it maintains accounts with or conducts transactions on behalf of?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.12	Does the Company make risk-based assessments of their customer base and their transactions?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.13	Does the Company determine the appropriate enhanced due diligence for customers and transactions that you have identified may pose a heightened risk of illicit activities at or through your company / branches?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.14	Does the Company assess its Co customers AML policies / practices (If applicable)?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.15	Does the Company periodically review and update customer information in relation to its client base?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Please indicate the frequency of reviews				
6.16	Does the Company record customer/transaction information to understand the normal	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
6.17	Does the Company collect information surrounding its customer's business activities?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

6.18 Does the Company conduct ongoing monitoring of its customer's that covers all products? **Yes** **No**
 Please describe whether such processes are manual or automated

Reportable Transactions- Sanctions / AML / CTF / Mandatory

6.19 Does the Company screen customers & transactions against sanctions lists of persons, entities or countries issued by government / competent authorities? **Yes** **No**
 If so what sanction programs are used?

6.20 Where cash transaction reporting is mandatory, does the Company have procedures to identify transactions structured to avoid such obligations? **Yes** **No**

6.21 Does the Company have policies to reasonably ensure that it only operates with correspondence bank which possess relevant licences in their countries of origin? **Yes** **No**

6.22 Is there a regulatory requirement to file currency transaction reports? **Yes** **No**
 If yes: **What is the threshold?**
 Does your company have internal procedures for documenting these transactions?
 Are there any restrictions on currency / cash transactions imposed by regulation (internal or external driven restriction on the amount, type or number of currency transactions?)

Payment Details

Bank Account Details:

Registered Address:

Name of Bank:

Bank Account:

Sort Code:

Reference Number:

IBAN Number :

Swift Address:

Current Address

Address 1

Address 2:

Address 3:

City:

Country:

Registered Number:

Transaction Details

Return: Travellers Cheques
 Encashment Services Ltd.
 WWW
 Thorpe Wooc
 PE3 6SB

Section 9: Authorised Signatory

Where names of individuals have been requested and provided, please ensure that you provide FULL names as they would appear on government issued ID e.g. a passport. By signing below, Client hereby acknowledges and confirms that the information that it has provided is accurate and correct and that the contact name(s) and authorised signatories are authorised to transact on behalf of the client submitting the application to Travelex. The client also agrees that where any changes occur, they will provide Travelex with the notice of changes within 30 days of them taking effect. A facsimile copy of the signature shall have the same force and effect as an original and shall be binding.

Authorised Signatory:
Print Name:
Position / Role:
Date:

Authorised Signatory:
Print Name:
Position / Role:
Date:

Return: Travellers Cheques
Encashment Services Ltd.
WWH
Thorpe Wooc
PE3 6SB



Return addresses

Travellers Cheques Encashment Services Ltd
 Worldwide House
 Thorpe Wood
 Peterborough
 PE3 6SB
 United Kingdom

Marked for the Attention / Email:

Registered Address:

Travellers Cheques Encashment Services Ltd
 Kings Place
 4th Floor
 90 York Way
 London
 N1 9AG

Registered Number: 05393803

Complete List of Documents that must be included with this form:

- **Certified Certificate of Incorporation**
- **Ownership and Management Structure appropriately certified**
- **Passport copy / valid photo ID for shareholders who own or control more than 10% of your business**
- **Company Compliance / AML Policy / Procedures**
- **Authorised Signatory List / Company Signing Mandate**

TRAVELEX ENCASHMENT FORM

Please complete this form in capital letters and enclose with the original defaced travellers cheques. Please use additional forms for each currency of travellers cheque to be sent.

Section 1: Cheque information	
Currency of Cheques	
Number of Cheques	
Value of Cheques	
ID verification is required dependant on value of travellers cheques remitted, see appendix E	

Section 2: Customer details (lack of information may result in a delay)	
Title	
First Name	
Surname (Family Name)	
Date of Birth	
Full Address	
Post or ZIP Code	
Country	
Telephone/Fax Number	
Email Address	

Section 3: Bank details for Wire/Electronic Payment	
Currency of Payment	
Currency Payment Requirements ¹	

Full Bank Name	
Full Bank Address	
SWIFT/BIC Code ²	
IBAN Number ³	
Account Number (incl sort code)	
Name of Account Holder (as per section 2) ⁴	

Section 4: Signatures	
Sender's Signature	
Date	

- ¹ [Appendix 1 - A](#)
- ² [Appendix 1 - B](#)
- ³ [Appendix 1 - C](#)
- ⁴ [Appendix 1 - D](#)
- ⁵ [Appendix 1 - E](#)

APPENDIX 1

A - Currency Payment Requirements

Payment in the currencies listed below require the following information

- US\$ - ABA/Routing number
- AUD\$ - BSB number (Bank State Branch Number)
- CAN\$ - RTN (Routing transit Number)
- RAND - Branch Code

B SWIFT/BIC Code

The SWIFT/BIC Code is the Bank Identifier Code which is a universal method of identifying financial institutions in order to facilitate automated processing of telecommunication message in banking and related financial environments.

- The SWIFT/BIC consists of 8 or 11 characters comprised of the following components:
- BANK CODE – 4 alphabetical characters
- COUNTRY CODE – 2 letter code
- LOCATION CODE – 2 alphanumeric characters
- BRANCH CODE – 3 alphanumeric characters, the branch code is optional

This information should appear on your bank statement. If you require further help please contact your bank.

C - IBAN Number

The IBAN number is the International Bank Account Number which is the standard that has recently been introduced for use within the European Banking System. This should appear on your bank statement. If you require further help please contact your bank.

We are unable to make payment via Bank Transfer to a UK, European or Middle East based bank account if this information is not provided. Settlement may be significantly delayed.

D – Account Holder Name

Account holder should be the same as that stated in Section 2 with the exception of Estate claims where the appropriate documents have been provided.

E – ID Requirements

If your remittance exceeds one of the following values, we require a copy of either a Passport, Driving Licence or National ID to complete the encashment process.

Currency	Value ID required
GBP	999.99
USD *	1,500.00
EUR	1,200.00
AUD	1,800.00
CAD	1,700.00
HKD	12,000.00
ZAR	17,000.00
CHF	1,500.00

*For transaction completed in the USA or by US Citizen's the value that requires ID is set at USD 999.99