

CORPORATE DUE DILIGENCE QUESTIONNAIRE TRAVELLERS CHEQUE ENCASHMENT SERVICES LTD

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

Section 1. Re	lation	nship Ma	nager De	etails					Office Use only.
These people must to authorised to act on on behalf of your Company. Please provide verification						Tick if complete/rec.			
Contact Name									
Role Title									
Email									
Telephone									
How many peop	le are i	n your Com	pliance dep	partment?					
Within this depa Laundering and				e dedicated to A	nti-Mon	ey			
Nominated Offic	er/MLF	₹ O:							
Role Title									
Email									
Telephone									
Section 2. Co	mpar	ny Inform	ation an	d Details					
Full Legal/Regist	ered Na	ame							
Trading Name U	sed (if c	different)							
Company Regist	ered Nu	ımber							
Country of Incor	poratio	n							
Date of Incorpor	ration					DD	MM	YY	
Number of Empl	loyees (approx)							
			Addres	s of Registered C	Office				
Building Number	 r/Name								
Street									
City									
Postcode/Zip Co	de								
Country									
What is the lega	al form	or your Cor	mpany? - If	listed on a stock	k exchar	nge, please	highlight th	e exchange	
Private Owned E	ntity?			Public Owned E	Entity?				
Stock Code		Exchange		Stock Code			Exchange		

Does your Company m authorised to operate?	Yes	No			
Does your Company/Affiliate operate as a shell company?					No
Section 3. Regulat	tory Supervision/Backg	round			
)	ated for its activities by a Finar			Yes	No
Name of Regulator/s					
Number of Regulators					
Is your Country a mem	ber of the FATF or FSRB?			Yes	No
Name of FSRB (I/A)					
Is your Company subject	ct to regulation in relation to t	the prevention of	ML and	Yes	No
Name of Authority					
Does your regulatory authority conduct reviews on your compliance with AML laws?					No
If yes, how often					
What was the date of the last regulatory audit/review?					YY
Did the findings result in any fine or fines or restrictions by any regulator /supervisor or financial sanctions by any state?					No
Are you a member of any associations or trade bodies?					No
Section 4. Ultimat	te Beneficial Ownership	o and Senior N	/lanagem	nent	
showing the percentag purpose of this questio own / controls or has v	the controllers/shareholders of the ownership of each of the pri- onnaire "shareholders" is any proting power of 10% or more could an ownership structure characters.	incipal controllers person or legal en of share or any cla	s/sharehold tities that, ones	ers as follow directly or ind ties of your i	s. For the directly,
Entity (Legal Name)	Corporate/Natural Perso	on % Owr	nership	Country	of Origin

Section 5. Senior Manager	nent				
, ,	ion. Should y	ture chart / board of director. Please you require more space either use th can be found below:	•		
Website Address					
Name		Designation/Ro	ole		
		compliance program that includes ordinating and overseeing the AML	Yes	No	
If Yes, please provide their details	in section 1.				
Section 6. Anti Money Lau Practice/ Commitment	ndering /	Counter Terrorist Financing	, Policies,	/	
Please answer all questions ac	curately. F	ailure to do so, may result in dela	ays or serv	ices impact	ed.
Does the Company have a written and terrorist financing?	poicy design	ned to prevent money laundering	Yes	No	
If yes, is the compliance programr committee?	Yes	No			
Does the Company document it's AML/CTF regulations?	Yes	No			
Does the Company periodically audit it's AML/CTF policies and procedures to ensure that they meet the required standards and are relevant?				No	
If Yes, please detail the frequency	and whether	er it is an internal/external function			
Does the Company report suspicion written processes which are in pla		ons to the FIU and have developed at and detect the above?	Yes	No	
Does the Company have a policy p Banks/anonymous customers?	Yes	No			
Does the Company have policies t transactions with or on behalf of S	-	y ensure that they will not conduct hrough any of it's products?	Yes	No	

Does the Company have a policy in place to deal with Politically Exposed Persons?	Yes	No	
Does the Company record customer/transactions information in compliance with applicable laws?	Yes	No	
Know your Customer, Due Diligence and Enhanced Due Diligence for Chec	ues to be	Encashed	
Does the Company have procedures to establish a record for each new customer noting their respective identification documents and 'Know Your Customer' information?	Yes	No	
Does the Company verify the identity of their customers on whose behalf it maintains accounts with or documents transactions on behalf of?	Yes	No	
Does the Company make risk-based assessments of their customer base and their transactions?	Yes	No	
Does the Company determine the appropriate enhanced due diligence for customers and transaction that you have identified that may pose a heightened risk of illicit activities at, or through your compnay/branches?	Yes	No	
Does the Company assess its Co customers AML policies/practices (if applicable)?	Yes	No	
Does the Company periodically review and update customer information in relation to it's client base?	Yes	No	
Please indicate the frequency of reviews			
Does the Company record customer/transaction information to understand the normal?	Yes	No	
Does the Company collect information surrounding it's customer's business activities?	Yes	No	
Does the Company conduct ongoing monitoring of it's customer's that covers all products	Yes	No	
Please describe whether such processes are manual or automated.	Manual	Automated	
Reportable Transactions - Sanctions / AML / CTF/ Mandatory			
Does the Company screen customers and transactions against sanctions lists of persons, entities or countries issued by government / competent authorities?	Yes	No	
If so, what sanction programmes are used?			
Where cash transaction reporting is mandatory, does the Company have procedures to identify tranactions structured to avoid such obligations?	Yes	No	

Does the Company have policies to a correspondence bank which postorigin?	Yes	No		
Is there a regulatory requirement t	Yes	No		
If yes, what is the threshold?				
Does your company have internal transactions?	procedures for documenting these	Yes	No	
Are there any restrictions on curre (internal or external driven restrict currency transactions?	Yes	No		
Does the legislation in your countr criminal offence?	y prescribe the offence of tax evasion as a	Yes	No	
Does your bank/company consider new customer or supplier?	Yes	No		
Does your bank/company have cou with tax evasion?	Yes	No		
Section 7. Payment Details				
Name of Bank				
Registered Address				
Registered Number				
Bank Account Number				
Bank Sort Code				
Reference Number				
IBAN Number				
Swift Address				
Transaction details				

Section 8. 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:	DD	MM	YY			
Authorised Signatory:						
Print Name:						
Position Role						
Date:	DD	MM	YY			
	Return Addre	ss:		i		
Tra	vellers Cheques Encashm	nent Services Ltd		1		
	Worldwide Ho					
	Thorpe Woo	d				
	Peterboroug	h				
	PE3 6SB					
	United Kingdo	om				
	Registered Add	ress:		1		
Tra	vellers Cheques Encashm			1		
Worldwide House						
Thorpe Wood						
Peterborough						
PE3 6SB						
	United Kingdo	om				
	Registered Number:	08307855				
	ocuments to be returned	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 Police				1 L		
Authorised Signatory List/Compa	ny Signing Mandate					

Section 9. Personal Data - Information

Using your information

The information we ask for when you apply for this account is used to:

Check applicants' indentities and their eligibility for this account.

Manage your account and relationship with us.

Facilitate our statutory anti-money laundering and anti-fraud checks, which may include sharing data with credit reference agencies.

You don't have to give us any of this information, but if you don't provide all the requested items, we won't be able to deal with your application. We will not use your data for any other purpose.

Travelex recognises the importance of safeguarding the personal information of our customers. Our Privacy Notice sets our the basis on which your information will be collected, stored and used by us, and reflects Travelex's commitment to maintain the confidentiality and security of your information, and provide the best possible service.

You can access the full notice here: https://www.travelex.co.uk/privacy-statement