



Federal Democratic Republic of Ethiopia
Financial Intelligence Service

**SUSPICIOUS OR UNUSUAL
TRANSACTION REPORT**

Banks should report suspicious or unusual transaction to Financial Intelligence Service based on the proclamation No. 780/2013 and customer Due Diligence Directives of National Bank of Ethiopia No. SBB/46/2010

B: Particulars of person or entity that is being reported or conducting a transaction

PLEASE NOTE

1. Please complete as many fields as possible in part B
2. Complete part B1 if you are reporting a Person.
3. Complete part B2 if you are reporting an Entity.
4. If multiple persons or entities are being reported, please supply details for each on a separate page

B1: Particulars of person being reported

1. Person's Involvement (mark with an X):* Individual ☐ on behalf of another person ☐
 2. Full name(s) of person:-----
 3. other name(s) of a person:-----
 4. Identification type (mark with an X): Known ☐ Unknown ☐ Unavailable ☐ Others ☐
- 4.1) If Known; Please! Register the followings

Identification information	
Residence identification number *	
Other Identification number *	
Birth date *	
Sex *	
Passport number *	
Issuing Country of Passport *	

5. Country of Residence (if other than Ethiopia):-----
6. Country of origin (if other than Ethiopia): -----
7. Occupation of person:--

Address information	
Country	
State/region*	
Sub-city/Zone*	
Woreda*	
Town	
Kebele	
House No. *	
Postal Address	

8. Address:-----
- 8.1) If the address ☐ known, please provide the following:

Known

Unknown ☐

Unavailable ☐

Others ☐

9. Telephone number(s) and E-mail address of a contact person (e.g. +251 -----)



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Telephone number(s) and E-mail address	
Business mobile Tel No *	
Business contact Tel No: *	
Business Fax No:	
Residential contact Tel No	
E-mail address of contact person	

C: Transaction, Account(s) and Associates information

PLEASE NOTE 1. Please complete as many fields as possible in part c

2. If multiple transactions are involved, please supply details for each transaction on a separate page

1. Date and time*-----
2. transaction type*-----
3. Manner in which the transaction was conducted *-----
4. Currency in which the transaction was conducted-----
5. Amount of funds Birr value *----- Other currencies-----
6. Account
7. Beneficiary Information

List of Account	Branch Information
Name of Branch: *	
Account Number: *	
Owner name *	
Date opened:	
Balance held	
Type of Account:	
Date closed	
Date of balance held	

Beneficiary Account and Address information	
Name of Branch *	
Account Number*	
Beneficiary Name *	
State/region *	
City/ Town *	
Woreda *	
Kebele	
House No. *	
Tel Number	

8. Associates

8.1. Individual Association

If the subject of the disclosure has an associate and the associate is an individual, fill in the following about the associate. If there are 2 or more associates that are individuals, attach the number of pages required to give the following information for the other associate(s).

Individual Information	
Full Name *	
Other name(s)	
Id Card No. *	
Occupation	
Reason For Association to main subject	
Gender	
Nationality	
Passport No.	
Place of work	

8.2. Companies Association



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