

MONEY LAUNDERING REPORT FORM

Report to Money Laundering Reporting Officer	
Staff member name	
Title & Department	
Telephone	
E mail	
Details of Suspected Offence	
Names and addresses of person/s involved	
Nature of activity	
Value of activity £	
Nature of suspicions	
Have you discussed your suspicions with anybody?	
Do you have any reason not to disclose the matter to NCA?	
For completion by the MLRO	
Date received	
Date acknowledged	
Case number reference	
Are there reasonable grounds for suspecting money laundering?	
Confirm data of report to NCA (if yes)	
Category	1 – Debt or charge 2 – Overpayment 3 – Refund 4 – Cashier or error 5 – Land or building resale within 3-12 months 6 – House or asset resale within 3 months
Signed and dated	
This report should be retained for a minimum of 5 years	

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