



# SOURCE OF FUNDS DECLARATION

3 PETER HILL ROAD,  
MAYARO, TRINIDAD, W.I.  
868-630-4228  
WWW.GEACUTT.COM

## TRANSACTION DATE:

(ALL DATE TO BE WRITTEN IN THE FORMAT DD/MM/YY)

<b>IDENTITY OF MEMBER</b>		<b>MEMBER NO.:</b>
NAME:	DATE OF BIRTH:	GENDER:
ADDRESS:		
ID <input type="checkbox"/> DP <input type="checkbox"/> PP <input type="checkbox"/> #:	ISSUE DATE:	EXPIRY DATE:
RESIDENT <input type="checkbox"/> NON RESIDENT <input type="checkbox"/>	NATIONALITY:	COUNTRY:
CONTACT: (H) (B) (C)	OCCUPATION:	
EMPLOYER'S NAME & ADDRESS:		

<b>IDENTITY OF DEPOSITOR (If different from above)</b>		
NAME:	DATE OF BIRTH:	GENDER:
ADDRESS:		
ID <input type="checkbox"/> DP <input type="checkbox"/> PP <input type="checkbox"/> #:	ISSUE DATE:	EXPIRY DATE:
CONTACT: (H) (B) (C)	RELATIONSHIP TO MEMBER:	

<b>DETAILS OF TRANSACTION</b>		
ACCOUNT NO(S):	TYPE OF ACCOUNT: SHARES <input type="checkbox"/> DEPOSIT <input type="checkbox"/> LOAN <input type="checkbox"/> FIXED DEPOSIT <input type="checkbox"/> OTHER <i>Specify</i>	
NATURE OF TRANSACTION:		
TRANSACTION DETAILS: CASH <input type="checkbox"/> CHEQUE <input type="checkbox"/> CASH & CHEQUE <input type="checkbox"/> WIRE TRANSFER <input type="checkbox"/> OTHER <i>Specify</i>		
DEPOSIT AMOUNT: CASH TT\$	CHEQUE TT\$	TOTAL TT\$
SUPPORTING DOCUMENTS ATTACHED: YES <input type="checkbox"/> NO <input type="checkbox"/> <i>Reason</i>		

<b>DECLARATION OF SOURCE OF FUNDS</b>		
I/We declare that the Source of Funds is: _____		
_____		
_____		
_____		

I/We understand that it is the GUAYMAY ENERGY ALLIANCE CREDIT UNION CO-OP SOCIETY LTD's policy to verify the source of funds before accepting payments for deposit, transfer or for the purchase of any other currency or instruments. Consent is hereby given to the GUAYMAY ENERGY ALLIANCE CREDIT UNION CO-OP SOCIETY LTD to disclose this information to law enforcement authorities.

----- SIGNATURE OF PERSON CONDUCTING TRANSACTION	----- TRANSACTION TAKEN BY: NAME IN CAPITAL LETTERS	----- STAFF SIGNATURE
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<b>OFFICIAL USE ONLY</b>		
TRANSACTION ACCEPTED <input type="checkbox"/> TRANSACTION DECLINED <input type="checkbox"/> <i>Reason</i>		
TRANSACTION INCOMPLETE <input type="checkbox"/> <i>Details</i>		

STAMP:		
----- AUTHORISED BY	----- AUTHORIZING OFFICIAL SIGNATURE	