

threshold transaction report form

➤ 1. Third party depositor details

Name depositor

Title: _____ First: _____ Middle: _____

Surname: _____

Date of birth: _____ / _____ / _____

Current residential address (cannot be PO BOX address)

Address: _____

State: _____ Country: _____ Postcode: _____

Mailing address (if different to the address above)

Address: _____

State: _____ Country: _____ Postcode: _____

Phone: _____ Email: _____

Member RIM: _____
(if they are a member)

Member RIM that funds are going to: _____

➤ 2. How was the person identified?

Documentation: _____

ID type: _____ ID number: _____

Issuer: _____ Expiry date: _____ / _____ / _____

Country of issue: _____

Office use only

Has the depositer been correctly verified? Yes

Have Prosper notes been added? Yes

Have you sent a copy of the form to Compliance Dept? Yes

Original form held in daily tellers work? Yes

Teller name: _____

Date: ____ / ____ / ____

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