

Royal Cayman Islands Police Service

INSTRUCTIONS TO BANK:

- Prepare two copies of this form for each suspected forgery.
 Submit copies of completed form with each suspected forgery to the Financial Crime Unit Office.
 If desired, an additional copy of this form should be prepared and retained for your records.

Forged Currency Report						
FROM: (Indicate Bank's Name and Mailing Address)					Do Not Write In This Space	
Telephone Number of	of Bank					
Point of Contact (include extension and e-mail address, if applicable)					Exhibit Number	
		IMPORT	ANT NOTICE			
Bank tellers and persons surrendering the forgery should date and initial each forgery with pen and ink in the border areas of the forgery for identification. If the person surrendering the forgery knows from whom he/she received it, or has a description of the passer, or his/her auto, or any other information, TELEPHONE the Financial Crime Unit Office IMMEDIATELY and hold the forgery. (The telephone number of the Financial Crime Unit office can be found at the top of this form.)						
DESCRIPTION OF	F FORGED CUI	RRENCY				
DENOMIN ATION	USD KYD	OTHER (Please Specify)	SERIES	SERIAL NUMBER		
FORGED CURRENCY RE	ECEIVED FROM			L		
NAME OF CUSTOMER / BUSINESS					DATE OF DEPOSIT	
CUSTOMER / BUSINESS ADDRESS CUST					MER'S HOME PHONE	
				CUSTON	MER'S BUSINESS PHONE	
NAME OF PERSON SURRENDERING AND INITIALING CURRENCY NAME OF TELLER RECEIVING AND INITIALING CURRENCY						
DOES THE CUSTOMER HAVE ANY INFORMATION AS TO THE SOURCE OF THE FORGERY?						
WAS THERE ANY SUSPICIOUS ACTIVITY?					□ NO □ NA	
IS THIS A NON-CUSTOMER?					□ NO □ NA	
BRIEF CIRCUMSTANCES (Continued on back page):						
SIGNATURE OF PERSO	ON SURRENDER INC	G THE FORGED CURRENCY	SIGNATURE OF POI	SIGNATURE OF POLICE OFFICER RECEIVING FORGED CURRENCY		
DATE & TIME PERSON (DD/MM/YY)		HE FORGED CURRENCY: 0:00 AM/PM)	DATE & TIME OFFIC (DD/MM/YY)	DATE & TIME OFFICER RECEIVED THE FORGED CURRENCY: (DD/MM/YY) (00:00 AM/PM)		
DISPOSITION (Fo	r Financial Crin	ne Unit Use Only)	'			
Genuine currency and copy of report returned to bank (Receipt No)						
Acknowledgement of receipt returned to bank						
Other (Specify)						

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BRIEF CIRCUMSTANCES (Continued from front page)			
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Signature of Person Filling out Brief Circumstances:	Date (DD/MM/YY):	Time (00:00 AM/PM)	
Signature of Witness:	Date (DD/MM/YY):	Time (00:00 AM/PM)	