

**ANTI-MONEY LAUNDERING AND COMBATING TERRORIST
FINANCING CERTIFICATION/QUESTIONNAIRE**
For financial and/or public institutions



Please fill out all the blanks, not scribbles or amendments. If it does not apply write N.A.

1. General Information

Full name of Institution		Country	ID Number
No. domestic branches	No. foreign branches	Specify countries	

2. Policies and procedures

No.	Question	Yes	No	
1	Is your Institution subject to governmental regulations to prevent and combat money laundering and terrorism financing?	<input type="checkbox"/>	<input type="checkbox"/>	
2	Does your Institution have a system to prevent and combat money laundering and terrorism financing (AML/CFT) that adheres to national and international legal requirements, duly written and current, with policies, internal rules and procedures that are mandatory to follow by all employees?	<input type="checkbox"/>	<input type="checkbox"/>	
3	Has your AML/CFT system or your writing policies and procedures been revised by the surveillance authority? If yes, provide the name of the authority and when was the last revision?	<input type="checkbox"/>	<input type="checkbox"/>	
	<table border="1"> <thead> <tr> <th>Name</th> <th>Date</th> </tr> </thead> <tbody> <tr> <td></td> <td>MONTH/DAY/ YEAR</td> </tr> </tbody> </table>			Name
Name	Date			
	MONTH/DAY/ YEAR			
4	Are your internal policies and procedures in line with the FATF (Financial Action Task Force on Money Laundering)/GAFI (Grupo de Acción Financiera Internacional) or the GAFILAT (Grupo de Acción Financiera de Latinoamérica) recommendations?	<input type="checkbox"/>	<input type="checkbox"/>	
5	Has your AML system include policies ensuring the implementation of reasonable due diligence measures of "Know Your Customer" (KYC), in order to obtain and keep current and valid information of your customers, their legitimate activities, the origin and destination of their funds?	<input type="checkbox"/>	<input type="checkbox"/>	
6	Does that system require strong due diligence measures of KYC to PEPs or PPEs (Politically or Public Exposed Persons) and to any one that represents higher higher levels of risk of money laundering or terrorist financing?	<input type="checkbox"/>	<input type="checkbox"/>	
7	Has your Institution established a system to detect accounts and transactions where the account holders are in the OFAC (Office of Foreign Assets Control) or UN (United Nations Organization) lists and other official lists of control?	<input type="checkbox"/>	<input type="checkbox"/>	
8	Does your Institution maintain transaction records of your customers and their relevant information, during the required legal term?	<input type="checkbox"/>	<input type="checkbox"/>	
9	Does the AML/CFT apply to entire operations include local and international transactions?	<input type="checkbox"/>	<input type="checkbox"/>	
10	Are the AML/CFT applicable to your foreign branches and majority owned subsidiaries or affiliates?	<input type="checkbox"/>	<input type="checkbox"/>	
	If " Yes", please attach the name of the those institutions	N.A	<input type="checkbox"/>	
11	Does the FI assess its FI customers' AML/CFT policies or practices?	<input type="checkbox"/>	<input type="checkbox"/>	
12	Does your Institution have a AML Compliance Officer? If yes, please provide the information below	<input type="checkbox"/>	<input type="checkbox"/>	
	Name	Title or position	E-mail address	
	Phone			
	Full physical address	City	Country	
13	Does your Institution have an internal or external audit program to monitor or check the AML/CFT system?	<input type="checkbox"/>	<input type="checkbox"/>	
14	Does your Institution have procedures to identify structured transactions to avoid cash transactions reports?	<input type="checkbox"/>	<input type="checkbox"/>	
15	Does your Institution have clear procedures to monitor, identify and communicate suspicious activities or transactions to the correspondent authority?	<input type="checkbox"/>	<input type="checkbox"/>	
	If yes, to which authority do you have to report? _____			
16	Does your Institution have an employee training program regarding the adequacy of know your customer procedures and to prevent and combat money laundering and terrorism financing and retain records of its training sessions?	<input type="checkbox"/>	<input type="checkbox"/>	
17	Does the FI employ third parties to carry out some of the AML/CFT functions of the FI?	<input type="checkbox"/>	<input type="checkbox"/>	
	If YES, does the FI provide AML/CFT training to relevant third parties?	<input type="checkbox"/>	<input type="checkbox"/>	
18	Does your Institution have physical presence in the country where it is trading?	<input type="checkbox"/>	<input type="checkbox"/>	

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No.	Question	Yes	No
	If not, does your Institution belong to a financial group that has physical presence and is it supervised by the authority that licensed to conduct banking or financial activities? Please provide the name of the financial group, the authority and country	<input type="checkbox"/>	<input type="checkbox"/>
19	Does the FI adhere to the Wolfsberg Transparency Principles and the appropriate usage of the SWIFT MT 202/202COV and MT 205/205COV message formats your customer procedures and to prevent? ¹	<input type="checkbox"/>	<input type="checkbox"/>
20	Does the FI have policies to reasonably ensure that it only operates with correspondent banks that possess licenses to operate in their countries of origin?	<input type="checkbox"/>	<input type="checkbox"/>
21	Does your Institution open accounts, operate or have financial relationships with foreign banks without physical presence in any country ("Shell Banks")?	<input type="checkbox"/>	<input type="checkbox"/>
22	Does your Institution offer "Payable Through Accounts?"	<input type="checkbox"/>	<input type="checkbox"/>
	If yes, are you certain that the entities which use those services are under the scrutiny of a supervisory authority and fully comply with the "Know Your Customer" policies, and the Anti-Money Laundering and Anti-Terrorist Financing Regulations established by FATF/GAFI, GAFILAT or UN?	<input type="checkbox"/>	<input type="checkbox"/>
23	Has been the Institution prosecuted or sanctioned for: • Do not comply AML/CFT regulation? • Money laundering or financing terrorism offenses or crimes? If so, please attach details (date, subject, authority, final result or current situation)	<input type="checkbox"/>	<input type="checkbox"/>
In case of negative answers in numbers 2 or from 4 to 16, provide information in this space or in an attachment			

I certify that I have read and understood this questionnaire, that the information in this questionnaire is complete and correct, and that I, as Compliance Officer or Legal Representative, am authorized to fill out this document and to sign it on behalf of this Institution.

Signature Date

Name Title or position Type and ID number

To Bancóldex		
Revised	Date	Signature
	MONTH/DAY/ YEAR	
Accepted	Signature	
<input type="checkbox"/> Yes <input type="checkbox"/> No		

(1) The four payment message standards to be observed are: i) FIs should not omit, delete, or alter information in payment messages or orders for the purpose of avoiding detection of that information by any other FI in the payment process; ii) FIs should not use any particular payment message for the purpose of avoiding detection of information by any other FI in the payment process; iii) Subject to applicable laws, FIs should cooperate as fully as practicable with other FIs in the payment process when requesting to provide information about the parties involved; and iv) FIs should strongly encourage their correspondent banks to observe these principles.