



ANTI-MONEY LAUNDERING COUNCIL SECRETARIAT
 5/F EDPC Building Bangko Sentral ng Pilipinas Complex
 Malate, Manila

Registration Form

Company Details

Supervising Agency: BSP IC SEC
 Industry Type
 Company Name.....
 Address.....
 ZIP Code.....
 Telephone Number/s.....
 Fax Number/s.....
 E-mail address of Compliance Officer (CO).....
 General responsibilities of CO.....

Authorization

This is to authorize _____ (Compliance Officer) and _____ (Alternate) whose signature/s appear below, to send in electronic form, Covered/Suspicious Transaction Reports to the ANTI-MONEY LAUNDERING COUNCIL SECRETARIAT. It is my responsibility to immediately inform AMLC in writing of any such change and/or modification covering this authorization.

(Compliance Officer)

(Alternate)

Signature.....
 Name (Print).....
 Designation
 Date Signed.....

Signature of President/Authorized Officer.....
 (name & designation)

For AMLCS' Use Only

Date Received:	Received by:

Covered Person Code: _____