

Customer form for payment and/or withdrawal of cash

In order to comply with the Anti-Money Laundering regulations we need to know our customers and their transactions. There fore we have to ask about payments and withdrawals of cash. For more information please visit www.andelskassen.dk (in Danish only) or www.fatf-gafi.org.

Customer information	n			
Name		CVR-/CPR number	Phone	
Adress	Postal code	e City	Country	
Is the transaction carried out on you	r own behalf: Yes No - please fill in	the form below (Transaction on behalf of otl	ers)	
Transaction on behal	f of others:			
Have you handed in proper identifica	ation?: No			
Name		CVR-/CPR number	Phone	
Adress	Postal code	e City	Country	
Describe the type of	transaction?			
Payment of cash	Withdrawal of cash	Purchase and sale of curre	ncy	
From where does the Currency Description	e money origin? For what is	the money intended?		
Signature of the cust	omer Signature			
Signature of the bank Date and signature/initials	v teller Name in block capitals/name stamp	2		
Date and signature/initials	Name in block capitals/flame stamp	,		