

Face to Face High Value Card Transactions - AML Compliance Required

If the Card transaction is greater than \$1,000 for an individual or \$3,000 for a corporate order (any tender type) anti-money laundering legislation requires completion of the following form. This information will remain strictly confidential. Note the required fields.

*Required Fields (Completed By Customer Service Representative) *Purchaser Company Name Principal Occupation/ Principal Business _____ *Last Name_____*First Name_____ *Address______*City_____ (If Company purchase, address should be for Company) *State/Province_____*Zip/Postal Code_____Phone_____DOB_____ *Government Picture ID Used to Verify Identity______ *Number _____* *Expiry Date of ID _____ *Place of Issuance _____ Acceptable Health Cards Are: BC Services Card or Quebec Health Card (only if offered as ID) *Use of Cards Gift Promotion ☐ Customer Incentive ☐ Nonprofit/Fundraiser Other (explain) *Transaction Information *Shopping District or Shopping Center Name ______ *Transaction Date _____ *CardSpot® Transaction Number (on CardSpot® receipt)______ *Customer Service Representative Name _____ *Number of Cards _____ *Total Transaction Value *Tender Type (check, credit, debit, etc.) _____