



GRENADA BUILDING & LOAN ASSOCIATION

*Sheltering Grenada for over 77 years
(Inc. 8th October 1925)*

DECLARATION OF FUNDS FORM

This form must be completed for all transactions equal to or exceeding EC\$10,000.00 or its equivalent in any currency.

FULL NAME/S USED			
DATE OF BIRTH	PLACE OF BIRTH	NATIONALITY	MARITAL STATUS
PLACE OF RESIDENCE		CURRENT PERMANENT ADDRESS	
POSTAL ADDRESS (IF DIFFERENT FROM ABOVE)		TELEPHONE NUMBER HOME WORK	FAX NUMBER HOME WORK
EMAIL ADDRESS	NAME & ADDRESS OF EMPLOYER (If Self Employed, state nature of employment)		
DURATION OF EMPLOYMENT	POSITION/JOB TITLE	ANNUAL INCOME/NET WORTH	
NAME OF BANK & A/C NUMBER		WILL ANYONE ELSE HAVE FINANCIAL INTEREST IN THIS ACCOUNT? NO <input type="checkbox"/> YES <input type="checkbox"/> (if yes please state who)	
IDENTIFICATION	ISSUER	NUMBER	
PASSPORT			
NATIONAL IDENTITY CARD			
DRIVER'S LICENSE			
OTHER			
DATE	TYPE OF TRANSACTION	ACCOUNT NUMBER	

I DECLARE THAT THE SOURCE OF THESE FUNDS ARE:

CLIENT'S SIGNATURE

TRANSACTION TAKEN BY:

AUTHORIZED BY

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FOR OFFICIAL USE ONLY		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
APPROVED	NOT APPROVED	FURTHER INFORMATION REQUESTED