

Instructions for completing 'Report of received cash payments over \$10.000 or equivalent'

Each free zone company in the course of business receives more than \$10.000 or equivalent in cash in one transaction or related transactions, must report this to FZA NV to comply with the Aruba Free Zone Operations Manual, Chapter 3 "Banking and financial requirements', point 2.1, by means of the form 'Report of received cash payments over \$10.000 or equivalent'.

What is a related transaction?

Any transaction conducted between a payer (or its agent) in 24-hours period are related transactions. Transactions are also considered related even if they occur over a period of more than 24 hours if the recipient knows, or has reason to know, that each transaction in one of a series of transactions.

When to report?

The cash transaction must be reported by means of the form 'Report of received cash payments over \$10.000 or equivalent' to FZA NV by the 14th day after the date the cash was received. If that day falls on a Saturday, Sunday or legal holiday, the form must be submitted on the next business day.

If the free zone company receives more than one cash payment for a single transaction or for related transactions, it must report the multiple payments any time it receives a total amount that exceeds \$10.000 within any 12-month period. Submit the report to FZA NV within 14 days of the day the company receives the payment that causes the total to exceed \$10.000.

Specific instructions

All parts must be completed. Although most of the requested data is self-explanatory, the following items are further elaborated on:

Item 6: For example: courier, boat captain, business owner, business representative, etc.

Item 7: Use a primary form of identification, such as valid drivers' license, passport or identity card with photograph.

Item 10: Enter the date the cash was received by the free zone company. If the cash was received in more than one payment, enter the date the payment was received that caused the combined amount to exceed \$10.000 (see related transactions, above) and check the 'yes' box for multiple payments.







Report of Received Cash Payments over \$10,000 or Equivalent

Last name: First name: Address: Date of birth (m/d/y): Occupation, profession or business:				
Address: Date of birth (m/d/y): Occupation, profession or				
Date of birth (m/d/y): Occupation, profession or				
Occupation, profession or			THE STATE OF THE S	
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Document used to verify identity:				
6.1 Issued by:				
6.2 Number:				
6.3 Date:				
6.4 Copy on file:	Yes o 1	No o	Yes o	No o
Address:	ısiness:			ed
	ısiness:			ed
Address: II: Description of transacti			ment	ed
Address: II: Description of transacti Date cash received (m/d/y):		nethod of pay	ment	ed
Address: II: Description of transacti	on and n		ment	ed
I	6.3 Date: 6.4 Copy on file: han two individuals are involved, please of Person/Business on whose b	6.3 Date: 6.4 Copy on file: Yes o han two individuals are involved, please complete the	6.3 Date: 6.4 Copy on file: Yes o No o	6.3 Date: 6.4 Copy on file: Yes 0 No 0 Yes 0 han two individuals are involved, please complete the information on additional forms for

