## **BSA/AML** Quantity of Risk Summary Form

Identifying Information:					
Charter Number	Bank Name:				
Bank Contacts	s:				
Title:					
First Name:		Last Name:			
Phone:		Name.			
Email:					
Alternate:					
First Name:		Last Name:			
Phone:					
Email:					
OCC Contacts	:				
First Name:		Last Name:			
Phone:					
Email:					
Alternate:					
First Name:		Last Name:			
Phone:					
Email:					

Products/Services:  Data for this section should reflect averages for he previous 12 months as of 9/30.)	Number of Retail Transactions (average daily volume)	Average Daily Volume (thousands)	Estimated/ Verified
I. Issuance of Traveler's Checks, Official Bank Checks & Money Orders:			
International Bank Drafts:     2a. Geographical Focus:     Enter information for all applicable geographical description.	phies.		
3. Domestic Wires Transfers <b>Totals</b> :			
4. Domestic PUPIDs Wire Transfers:			
<b>5.</b> ACH:			
<ul><li>6. Int'l Wires Transfers Totals:</li><li>6a. Geographical Focus:         <ul><li>Enter information for all applicable geographic</li></ul></li></ul>	ies.		
<ul><li>7. Int'l PUPIDs Wire Transfers:</li><li>7a. Geographical Focus:</li></ul>	phies.		
8. Remittance Products: 8a. Geographical Focus: Enter information for all applicable geographic	ies.		

9. Cross-Border ACH:			
9a. Geographical Focus: Enter information for all applicable geograph	phies.		
Products/Services: (Data for this section should reflect all accounts	Total Number of Accounts (actual number)	Total Outstanding Balances (thousands)	Estimated/ Verified
on record at the bank as of 9/30.)			
10. Loans Secured by Cash Collateral:			
<b>11</b> . Payroll Cards:			
<b>12.</b> Stored Value Cards Sold by Bank: (E-Cash, Smart Cards)			
13. Special Use/Concentration Accts:			
<b>14.</b> International Branch Facility:			
<b>14a.</b> Geographical Focus:.  Enter information for all applicable geog	raphies.		
<b>15.</b> Foreign Correspondent Accts:			
<b>15a.</b> Geographical Focus:  Enter information for all applicable geog	raphies.		

<b>16.</b> Payable Through Accts:		
<b>16a.</b> Geographical Focus:  Enter information for all applicable geog	graphies.	
17. Pouch Services with Foreign Institutions Persons and/or Businesses:		
17a. Geographical Focus: Enter information for all applicable geographical properties.	raphies.	
49 Foreign Donking Affiliate (e.g. Dorollel Donke	A	
<ul><li>18. Foreign Banking Affiliate (e.g. Parallel Banks</li><li>18a. Geographical Focus:         <ul><li>Enter information for all applicable geographical</li></ul></li></ul>		
<b>19.</b> International Department:		
<b>19a.</b> Geographical Focus:  Enter information for all applicable geographical for all applicab	raphies.	
<b>20.</b> Domestic Private Banking Customers:		
21. International Private Banking Customers:		
21a. Geographical Focus: Enter information for all applicable geog	graphies.	

<b>22.</b> Embassy & Consulate Banking:		Γ	
<b>22a.</b> Geographical Focus:  Enter information for all applicable geogra	phies.		
Trust Department Accounts			
Charitable Trust & Foundations			
23. Domestic Charitable Trust & Foundations:			
<ul><li>24. Foreign Charitable Trust &amp; Foundations:</li><li>24a. Geographical Focus:</li></ul>			
Enter information for all applicable ge	ographies.		
		Γ	
		L	
Customer Directed Accts (non-discretionary):			
25. Custodial Accts:			
26. Investment Advisory Accts:			
27. Revocable Trusts:			
28. Foreign Grantor or Beneficiaries:			
29. Loans to Closely Held Corporations:			
<b>30</b> . Cash Management			

31. Domestic Commercial Letters of Credit:			
<ul><li>32. International Commercial Letters of Credit::</li><li>32a. Geographical Focus:</li><li>Enter information for all applicable geog</li></ul>	raphies.		
33. Stand-By Letters of Credit:			
34. Brokerage Department/Operations:			
35. Investment Advisory/Mgmt:			
Customers:  Data for this section should reflect all customers on record at the bank as of 0/30.)	Total Number of Accounts (actual number)	Total Outstanding Balances (thousands)	Estimated/ Verified
Data for this section should reflect all	of Accounts (actual number)	Balances	
Data for this section should reflect all customers on record at the bank as of 0/30.)  36. Non-Resident Alien Accts:  36a. Geographical Focus:	of Accounts (actual number)	Balances	
Data for this section should reflect all customers on record at the bank as of 0/30.)  36. Non-Resident Alien Accts:  36a. Geographical Focus:	of Accounts (actual number)  raphies.	Balances	

<b>38.</b> Foreign Off-Shore Corporations:		
38a. Geographical Focus:		
Enter information for all applicable geogr	aphies.	
Marian Carrian Dunings (MCD)		
Money Service Business (MSB)		
39. Domestic Casa de Cambios/Currency		
Exchange:		
<b>40.</b> Foreign Casa de Cambios/Currency		
Exchange:		
40a. Geographical Focus:		
Enter information for all applicable geog	graphies.	
<b>41.</b> Money Transmitters :		
•		
42. Check Cashers:		
43. Seller/Issuer/Redeemer of Traveler		
checks and money orders:		
44. Seller/Issuer/Redeemer of Stored Value:		
(E-Cash, Smart Cards)		
<b>45.</b> Convenience Stores:		
<b>46.</b> Liquor Stores:		
47. Customers/Accts opened through the		
Internet, Mails, Wire, or Phone (non-branch):		

48.	Domestic Deposit Brokers:		
	Foreign Deposit Brokers: <b>49a.</b> Geographical Focus: Enter information for all applicable geograp	phies.	
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50.	Domestic Charitable Organizations:		
	Foreign Charitable Organizations:  51a. Geographical Focus: Enter information for all applicable geograp	phies.	
52.	Jewelry, Gem, and Precious Metal Dealers:		
53.	Travel Agencies:		
54.	Casinos:		
55.	Import/Export:		
56.	Broker Dealers:		
57.	Telemarketers:		

58. Car Dealers:				
<b>59.</b> Boat/Airplane:				
CTR/SAR data	and Optional Examiner feedba	ck		
Estimated Currency Transaction Report (CTR) and Suspicious Activity Report (SAR) volumes for the previous 12 months. (For the previous 12 months ending 9/30)  Optional: Feedback/Suggestions on ways to improve this Risk Assessment form, and our analysis of BSA/AML Compliance and Reputation risk.	CTR Volume (12months)	SAR Volume (12 months)		
Please save information and email a copy of the PDF file to your OCC Supervisory Office. Save a copy for your records.				
Submission Process  To be completed by your OCC Supervisory Office.				
User ID:	Te	mplate created on:		