



The United States of America
Department of Homeland Security
Washington, DC 20528
202-456-1414

**International Monetary Transfer Security Background Form
IMTSBF-7054.65, Section TF
Anti-Terrorism Funding, Anti-Money Laundering**

Purpose of this Form

The Government of the United States of America requires background information on all foreign nationals currently residing in countries other than the United States of America who are to be in receipt of financial funds or monetary instruments in excess of \$100 USD from American citizens through non-governmental channels. Any American citizen who is found to have transferred any financial funds or monetary instruments in excess of \$100 USD to any terrorist organization, money laundering scheme, organized crime organization, or any other organization (both within the United States of America and elsewhere) deemed to be illegal according to Executive Orders 10450, 10865, 12333, 12356; or sections 301 and 9101 of title 5, U.S. Code is guilty of Supporting or Engaging in Terrorism under Executive Order 13662, sections 2165 and 2201, title 42, which is a Federal felony equivalent in severity to Perjury and Sedition, and punishable by a maximum sentence of 23 years in prison. The Government of the United States of America reserves the right to monitor all international transfers of financial funds and monetary instruments occurring under its jurisdiction, and reserves the right to unilaterally suspend, halt, terminate, cancel, void, invalidate or renege any transfer found to be in breach of the above mentioned statutes.

In order to be in full compliance with sections 781 to 887 of title 50, U.S. Code; and parts 5, 732, and 736 of Title 5, Code of Federal Regulations this form must be completed in full and submitted to the Department of Homeland Security prior to the transfer of any financial funds or monetary instruments in excess of \$100 USD from an American citizen to any foreign nationals currently residing in countries other than the United States of America.

Organization of this Form

This form consists of three parts. Part 1 contains questions relating to background information of the recipient. Part 2 asks questions about the activities of the recipient, such as criminal history record, use of illegal drugs, and abuse of alcohol. Part 3 asks important security related questions.

Instructions for Completing this Form

1. Follow the instructions given by the person who supplied the form and any other clarifying instructions furnished by that person to assist in the completion of this form.
2. This form must be completed by hand, in black ink with clearly legible handwritten block letters. Illegible forms are invalid and will not be accepted by the DHS.

I have read the information contained on this page and understand my responsibilities in the completion of this form.

Name:

Signature:

Date:

3. All questions on this form must be answered. Forms with missing answers are invalid and will not be accepted by the DHS. If no response is necessary or applicable, this must be indicated on the form (for example, enter "None" or "N/A"). If an exact date cannot be reported, approximate or estimate the date to the best of your ability and indicate this by marking "APPROX" or "EST".

4. This form cannot be amended after it has been signed. Changes require the form to be completed again in its entirety and subsequently resubmitted to the DHS. Under certain limited circumstances, United States governmental agencies may modify the form consistent with your intent.

5. The State codes (abbreviations) designated by the United States Postal Service (USPS) must be used in the completion of this form. Do not abbreviate the names of cities or foreign countries.

6. The 5-digit postal ZIP codes are required to speed the processing of this form.

7. All telephone numbers must include country and area codes.

8. All dates provided on this form must be in the American Month/Day/Year or Month/Year format. Use numbers (01-12) to indicate months. For example, June 8, 1978, should be shown as 06/08/1978.

9. Whenever "City (Country)" is shown in an address block, also provide in that block the name of the country if the address is outside the United States of America.

10. If additional space is required to list information, a continuation sheet International Monetary Transfer Security Background

Continuation Form IMTSBF-7054.65, Section TF must be used. Each additional sheet must also be signed.

11. In answering the questions on this form, keep in mind that the answers are legally binding on the American citizen performing the international transfer of financial funds or monetary instruments, and falsifying information is a Federal felony which will result in the cancellation of the transfer and is punishable by a maximum sentence of 5 years in prison.

Disclosure of Information

The information given is for the purpose of determining the eligibility of the recipient for receiving an international transfer of financial funds or monetary instruments from an American citizen. The collection, maintenance, and disclosure of background investigative information is governed by the Privacy Act. The company which requested this form have possibly (but not likely) published notices in the Federal Register describing the systems of records in which records will be maintained. Copies of the relevant notices may be obtained from the person who supplied this form.

Additional Information

1. Upon completion and receipt of this form, the receiving party shall disclose all information on this form to the Transfer Security Board (TSB) for its review.

2. By completing this form, you are demonstrating that you agree with all information involved. Should any information be found to be unsatisfactory, you will be subjected to redress and retribution as determined by the members of TSB.

I have read the information contained on this page and understand my responsibilities in the completion of this form.

Name:

Signature:

Date:

3. Information provided on this form may be used against you in the future if your actions or responses are considered to be inadequate by the members of the TSB.

4. TSB may require you to complete this form multiple times if the information is inaccurate, illegible, or unsatisfactory in any way. You are solely responsible for the costs of completing this form and the time involved.

5. Any agreements that you have made with the person who have given you this form must be abided by while completing this form. If you have previously completed the Religion Renouncing Form, previous Security Forms, previous Confidentiality Agreements, Supply and Distributorship Agreements, Purchasing Agreements, or any other documentation deemed important by the initiator of the international monetary transfer, you will need to complete this form with a different color ink pen and attach it to all previous documentation.

6. The TSB thanks you for your time and cooperation in helping to provide a safer environment for the citizens of the United States of America and its allies.

I have read the information contained on this page and understand my responsibilities in the completion of this form.

Name:

Signature:

Date:

General Information

Family Name:		Height:		Weight:	
Given Name:		Eyes:		Ears:	
Other Names:		Hair:		Nose:	
Nicknames:		Fingers:		Toes:	
Aliases:		Beard:		Moustache:	
Birthday:		Age:		Sex:	

Any other distinguishing features:

Ethnicity/Race:		Religion:	
Sexual Preference:		Smoking:	
Favorite Color:		Favorite Smell:	
Favorite Food:		Favorite Song:	

Residential Address:

Business Address:

Home Phone:	<input type="text"/>	Business Ph:	<input type="text"/>	Cell Phone:	<input type="text"/>
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In 25 to 50 words, describe your current mood:

Spousal Information

Family Name:		Height:		Weight:	
Given Name:		Eyes:		Ears:	
Other Names:		Hair:		Nose:	
Nicknames:		Fingers:		Toes:	
Aliases:		Beard:		Moustache:	
Birthday:		Age:		Sex:	
Any other distinguishing features:					
Ethnicity/Race:		Religion:			
Sexual Preference:		Smoking:			
Favorite Color:		Favorite Smell:			
Favorite Food:		Favorite Song:			
Date of Marriage:		Place of Marriage:			

Offspring Information

Total number of children:					
From this marriage:			Others:		
Names:	Heights:		Weights:		
Birthdates:	Ages:		Sexes:		
Birthplaces:	Pet Names:		Pet Species:		

American Citizen Information

Family Name:			Other Names:		
Address:					
Home Phone:		Business Ph:		Cell Phone:	

Identification Information

Nationality:		Spouse's Nationality:	
Passport Number:		Driver's License #:	
Passport Color:		License Color:	
Expiration Date:		License Expiration:	
Number of supplementary identification documents:			
Number of expired identification documents:			
Number of invalid identification documents:			
Number of illegal identification documents:			
Countries Visited:			
Countries Deported From:			
Countries Refused Entry To:			

In 25 to 50 words, describe your current approach to travel and foreign destinations:

Health Information

Do you now, or have you ever, had HIV?	<input type="checkbox"/>	If so, when?	<input type="text"/>
Do you now, or have you ever, had AIDS?	<input type="checkbox"/>	If so, when?	<input type="text"/>
Do you now, or have you ever, had SARS?	<input type="checkbox"/>	If so, when?	<input type="text"/>
Do you now, or have you ever, had Asian Bird Flu?	<input type="checkbox"/>	If so, when?	<input type="text"/>
Do you now, or have you ever, had TB?	<input type="checkbox"/>	If so, when?	<input type="text"/>
Do you now, or have you ever, had any form of cancer?	<input type="checkbox"/>	If so, when?	<input type="text"/>
Do you now, or have you ever, had green diarrhea?	<input type="checkbox"/>	If so, when?	<input type="text"/>
Have you ever had sexual intercourse with an HIV positive person?	<input type="checkbox"/>		
If so, when and where?	<input type="text"/>		
Have you ever had unprotected sexual intercourse with any person?	<input type="checkbox"/>		
If so, when and where?	<input type="text"/>		
Have you ever had sexual intercourse with any animal or inanimate object?	<input type="checkbox"/>		
If so, when and where?	<input type="text"/>		
Have you ever illegally procured or utilised any protected medications?	<input type="checkbox"/>		
If so, when and where?	<input type="text"/>		
Have you ever developed any cures or treatments suitable for protected status?	<input type="checkbox"/>		
If so, when and where?	<input type="text"/>		
Have you ever been addicted to alcohol?	<input type="checkbox"/>	Which?	<input type="text"/>
When?	<input type="text"/>	Treatment received:	<input type="text"/>
Have you ever been addicted to illicit drugs?	<input type="checkbox"/>	Which?	<input type="text"/>
When?	<input type="text"/>	Treatment received:	<input type="text"/>

Health Information (continued)

Have you ever been addicted to other drugs? Which?

When? Treatment received:

Have you ever been addicted to a fruit or vegetable? Which?

When? Treatment received:

Have you ever been addicted to gambling? How?

When? Treatment received:

Have you ever been addicted to sex? Positions?

When? Treatment received:

Have you ever been addicted to compulsive lying? Why?

When? Treatment received:

List physical ailments you are suffering from:

List physical therapies you are receiving:

List mental defects you are suffering from:

List mental therapies you are receiving:

List chronic ailments you are suffering from:

List respite therapies you are receiving:

Health Information (continued)

Have you ever been responsible for a person needing to seek medical treatment?

Explain:

Have you ever been responsible for a person committing suicide?

Explain:

Do you now, or have you ever, had suicidal tendencies?

Explain:

Have you ever committed suicide?

Explain:

Are you now, or have you ever been, in hospital?

Why?

When?

Treatment received:

Did you enjoy your time in hospital?

Why not?

Have any members of your family been in hospital?

Why?

When?

Treatment received:

In 25 to 50 words, describe your current state of health affairs:

Criminal Background Information

Have you ever been convicted of a crime?	<input type="checkbox"/>	What crime?	<input type="text"/>
When?	<input type="text"/>	Sentence:	<input type="text"/>
Have you ever committed a crime you were not convicted of?	<input type="checkbox"/>		
When?	<input type="text"/>	What crime?	<input type="text"/>
Have you ever been convicted of a crime you did not commit?	<input type="checkbox"/>		
When?	<input type="text"/>	What crime?	<input type="text"/>
Have you ever engaged in fraudulent or misleading business practices?	<input type="checkbox"/>		
When?	<input type="text"/>	What type?	<input type="text"/>
Have you ever owned or been in possession of a firearm of any kind?	<input type="checkbox"/>		
When?	<input type="text"/>	List firearms:	<input type="text"/>
Have you ever owned or been in possession of any other arms or munitions?	<input type="checkbox"/>		
When?	<input type="text"/>	List:	<input type="text"/>
Have you ever committed murder, manslaughter or rape?	<input type="checkbox"/>		
When?	<input type="text"/>	Victims:	<input type="text"/>
Do you enjoy committing crimes and/or inflicting pain upon others?	<input type="checkbox"/>		
Why?	<input type="text"/>		
Are you planning to commit a crime in the future?	<input type="checkbox"/>		
When?	<input type="text"/>	Crime:	<input type="text"/>
Have you ever committed a crime in the United States of America?	<input type="checkbox"/>		
When?	<input type="text"/>	Crime:	<input type="text"/>
Why?	<input type="text"/>		

Criminal Background Information (continued)

Do you secretly want to commit a crime that you haven't tried yet?

Crime:

Why?

In 25 to 50 words, describe your current state of mind as it relates to criminal activities:

Financial Information

Bank Name:		Savings Account Amount:	
Bank Street:		Checking Account Amount:	
Bank City:		Yearly Income:	
Bank State:		Yearly Expenses:	
Bank Country:		Bank Teller's Name:	

Do you have access to any banking accounts in any other nations?

Give details:

Have you ever committed financial fraud in the United States?

Give details:

How much money in taxes have you paid in your home nation this year?

How much money is in your wallet right now?

In 25 to 50 words, describe your current state of financial affairs:

Terrorism Security Information

Are you now, or have you ever been, a terrorist?

Acts of terrorism committed:

Are you planning on committing any terrorist acts in the future?

Describe:

Do you know, or have you ever known, any known terrorists?

Who?

Have you ever been known to know any known or unknown terrorists?

Who?

Are you a member of any legal terrorist organizations?

Which?

Are you a member of any illegal terrorist organizations?

Which?

Do you like, or have you ever liked, any terrorist causes?

Which?

Are you now supporting, or have you ever supported, any terrorist organizations?

Which?

Have you ever donated money to any terrorist organizations?

Which? Amount:

Have you ever donated money to any charitable organizations in terrorist nations?

Which? Amount:

Have you ever been involved in poultry terrorism?

In what way?

Terrorism Security Information (continued)

Is terrorism the greatest current threat to the security of the United States?

What is the current Threat Advisory Level in the United States?

Do you know if the Threat Advisory Level will increase in the next month?

Why?

Are you a threat to the security of the United States of America?

Why?

Have you ever been married to a terrorist?

Who and when?

Have you ever had sexual intercourse with a terrorist?

Who and when?

Have you ever killed a terrorist?

Who and when?

What is the root cause of terrorism against the United States of America?

How can the United States of America reduce terrorism?

Are terrorists threatening your country?

Why?

Have terrorists from your country threatened or attacked the United States of America?

Why?

Spell "terrorism":

Do you support the War on Terror?

Why?

Do you support the War on Fraud?

Why?

Terrorism Security Information (continued)

Have you ever been to Afghanistan?

Where and when?

Have you ever met an Afghani?

Who and when?

Have you ever been to Iraq?

Where and when?

Have you ever met an Iraqi?

Who and when?

Have you ever been to North Korea?

Where and when?

Have you ever met a North Korean?

Who and when?

Do you know the current whereabouts or location of Osama bin Laden?

Give details:

In 25 to 50 words, describe your current state of mind as it relates to terrorists and terrorism:

Solemn Declaration

By signing this form, I _____ do solemnly swear that all information contained herein is the truth, the whole truth, and nothing but the truth. I swear to the Lord our God on the Bible that I am an honorable and trustworthy person who will follow and obey the applicable laws of the United States to any and all transfers of financial funds or monetary instruments conducted with American citizens. I agree to meet any requirements of the American citizen I am involved in with in regards to transfers of financial funds or monetary instruments, business transactions, international travel and any other relevant interaction.

I understand and agree that the information I have provided will not be divulged to a third party without the express written consent of the American citizen involved in the transfer or the Department of Homeland Security.

Name: Home Phone:
Passport Number: Nationality:
Signature: Date:

OFFICIAL USE ONLY: DO NOT WRITE IN THIS AREA

Investigative agency: _____ Case Number: _____
Completed in full: Y / N Form Approved: Y / N
Operator Number: _____ Supervisor Number: _____
Form Number: _____ Secretary Number: _____
Operator Form Number: _____ TSB Number: _____
Transaction Number: _____ Baiter Number: _____
Supplementary Codes: _____ Master Baiter Number: _____