



Standard form for Listing Individuals

Part 1: Individual's name												
Agency submitting the request to the Anti-Money Laundering Office shall have as much as possible information to sufficiently identify the individual												
Full name (Thai Script)	Current											
	Previous											
Full name (English Script)	Current											
	Previous											
Name component (Break down full name into parts and use separate line for each part, starting from first name, middle name, last name, etc. respectively)	Describe name component											
	First name	Second name	Middle name	Last name	Geographic reference	Honorific or religious title	Named from :				Other (Specify)	
							Fathers' sname	Grandfather's name	Great grandfather's name	Mother's name		Tribal reference
Part 1 :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Part 2 :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Part 3 :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Part 4 :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Part 5 :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Part 6 :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Part 7 :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Gender												
Title or rank or position	Title :			Rank:				Position:				
Date of Birth	Date:			Month :				Year (Buddhist Era):				
Place of birth (Village, town or city, district, region, province, or state; and country)												
Nationality	Current											
	Previous											

State of residence(s)	Current	
	Previous	
Employment/Occupation		
Address as in house registration record. (please provide as detail as possible)	Current	
	Previous	
Contact Address	Permanent	
	Temporary	

ID, Passport(s) or other travel documents issued by respectable agency or organization (please provide as detail as possible and attach copy of such document(s) if possible))	Type of document	<input type="checkbox"/> Personal ID <input type="checkbox"/> Passport <input type="checkbox"/> Alien ID <input type="checkbox"/> Social security card <input type="checkbox"/> Driver's license <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Tax payer's ID <input type="checkbox"/> Other (please specify)
	Number	
	Issued by	
	Additional information	

Alias/ also-known-as/ nickname/ other pseudonym (that is not name recognized by law which is not sufficient for correctly identify the individual)	Type	<input type="checkbox"/> Alias <input type="checkbox"/> nickname <input type="checkbox"/> as-known-as <input type="checkbox"/> Other (please specify)
	Detail	(specify name)
	Supporting information	
	Additional information (if any)	

Name of parents	Father's name	
	Mother's name	

Marital Status (Specify if married/partnered/having a child)	Spouse/partner's name	
	Child's name	

Part 2: Basis for Listing and Statement of Case

Agency submitting the request shall tick at least one box below that applies to individual in Part 1

1. Being involved with an act of terrorism

1.1 Being an offender under an arrest warrant, a defendant, or Convicted for terrorism in accordance with the Penal Code under a category below

1.1.1 *Convicted* for terrorism in accordance with Section 135/1

1.1.2 *Convicted* for terrorism in accordance with Section 135/2

1.1.3 Convicted as supporter under Section 135/1 or Section 135/2

1.1.4 *Convicted* for terrorism in accordance with Section 135/4

1.2 Found from an investigation or intelligence to have committed an act under Section 135/1 or Section 135/2, Section 135/3 or Section 135/4 but has not been prosecuted

1.3 Has committed an act which is an offense under a law issued in accordance with a convention or other instrument relating to terrorism that Thailand is a party (please specify Section of which law, which state or convention or other instrument)

2 Being involved with an act of financing of terrorism

3 Act as an agent for individual in 1 or 2 or designated person under Section 4 or Section 5 of the Counter Terrorism Financing Act B.E. 2556 (2013)

4 Act as directed by individual in 1 or 2 or designated person under Section 4 or Section 5 of the Counter Terrorism Financing Act B.E. 2556 (2013)

5 Act under control of individual in 1 or 2 or designated person under Section 4 or Section 5 of the Counter Terrorism Financing Act B.E. 2556 (2013)

Part 3: Information, fact, act or evidence of act of individual under Part 1

Agency submitting the request shall gather information, fact, act or evidence of act of individual under Part 1 as much as possible and shall be an act up until present. The case being submitted to AMLO shall be summarized in precision, complete, correct and current to facilitate the correct designation by the Committee

Status of individual (please provide as detail as possible and attach copy of such document(s) (if possible))	wanted/ warranted	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown (See description below).....
	Detained	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown (See description below)
	Convicted/ Sentenced	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown (See description below).....
	Other	(See description below).....
Relationship with commission	(See description below)	

<p>of the offense and other designated person (please provide as detail as possible and attach copy of such document(s) (if possible))</p>	<p>(If this space is not sufficient, please use “annex 1)</p> <p>.....</p> <p>Please provide information, fact, act or evidence showing that the act relating to terrorism or terrorist financing <i>is being committed at present</i> or being an agent or being under control of such person and whether he is related to other designated person</p>
<p>Other information which would benefit the consideration for designation</p>	<p>(See description below)</p> <p>(If this space is not sufficient, please use “annex 2)</p> <p>.....</p> <p>Please provide other information, fact or evidence (if any) to support the fact under “Status of individual” or “relationship with the commission of offense and other designated person, as the case may be</p>

Part 4: Cooperation with other relating agencies

The committee’s consideration would base on complete, correct and up-to-date information.

If the committee, and AMLO, needs to contact the agency submitting the request for additional information on individual being proposed, for additional information. In this regard, do you permit the AMLO to inform relating agency in your jurisdiction that you had designated the individual, up on request.

permit not permit

and if that agency wishes to request the information you sent from the AMLO, to consider sending additional information to the AMLO, up on request, would you permit?

permit not permit

Could the AMLO provide your contact detail to other relating agency, up on request, to facilitate direct contact to designating agency for additional detail?

permit not permit

Part 5: Contact Point of designating agency

Please provide contact detail of contact point of designating agency for this designation.

Name – Last Name: Position:

Agency: (Please specify name, department (or equivalent), division or bureau, section/unit).....

Address:

Phone number:

Fax number:

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E-mail address:			
I hereby certify that information above is correct, factual. Additional documents for consideration are attached and certified.			
Signature of designating agency's official		Date	

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Annex 1 (to be used in case space provided is not sufficient)

Relationship with commission of the offense and other designated person (please provide as detail as possible and attach copy of such document(s) (if possible)) (See description below)

Annex 2 (to be used in case space provided is not sufficient)

Other information which would benefit the consideration for designation (See description below)

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**Explanatory Notes for the Standard Form for Listing Individuals
Proposed to Designating Committee**

Part 1: Individual's name

Agency submitting the request to the Anti-Money Laundering Office shall have as much as possible information to sufficiently identify the individual.

- **Full name (Thai Script):** Legal name of the individual in full and in Thai script as determined by the State's naming convention; apostrophes and hyphens should be included, and shall include current and previous. If being foreigner, please transcript into Thai.
- **Full name (English Script):** Legal name of the individual in full and in English script as determined by the State's naming convention; apostrophes and hyphens should be included, and shall include current and previous. If English is not official language, spelling as in government issued ID, such as passport and national ID, shall be used.
- **Describe name component:** First, please break down the full name into its parts and use a separate line under "Name components" for each part, starting with first name. Second, please describe each part of the name using one of the following categories: first name, second name, middle name, family or last name, father's name, grandfather's name, great-grandfather's name, mother's name, tribal reference, geographic reference, honorific or religious title. If the name component does not fit any of these descriptions, please choose "other" and describe in writing the category of the name component. Example: full name is "Somwang Dungjainuk Phungpratana Niruntarai Talodpai"

Name component (Break down full name into parts and use separate line for each part, starting from first name, middle name, last name, etc. respectively)	Describe name component											
	First name	Second name	Middle name	Last name	Geographic reference	Honorific or religious title	Named from :					Other (Specify)
							Fathers' name	Grandfather's name	Great grandfather's name	Mother's name	Tribal reference	
Part 1: Somwang	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part 2: Dungjainuk	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part 3: Phungpratana	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part 4: Niruntarai	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part 5: Talodpai	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part 6:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part 7:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: The aim of this section is to ensure that each part of the full name is accurately identified regardless of national naming conventions, so that, for example, last names are not mistaken for first names and vice versa, which affects the accuracy of matching the names specify by designating agency and the Designating Committee.

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- **Gender:** Indicate gender
- **Title or rank or position:** Indicate honorary, profession, religion, educational degree, current or previous lineage status
- **Date of birth:** Provide the date in DD/MM/YYYY format (the internationally accepted civil calendar). For Thai, use Buddhist Era (B.E.), for foreigner, use Anno Domini (A.D.). If date of birth is approximate, assigned administratively or there are other additional details that must be taken into consideration, specify information in the space provided.
- **Place of birth:** Provide name of the place of birth, including village, town or city; district, region, province, or state; and country.
- **Nationality:** Specify current nationality or citizenship, followed by previous nationality or citizenship if any). For previous nationality or citizenship, specify date when granted, revoked, annulled, withdrawn or when this status has otherwise been altered.
- **State of residence(s):** Please indicate current state of residence(s) if different from nationality and date(s) of residence. Specify additional previous state(s) of residence, if any, and provide the date(s) when granted, revoked, annulled, withdrawn or when this status has otherwise been altered.
- **Occupation:** Position, type of employment or professional qualification, position previously held (if any)
- **Address as in house registration record:** Provide as far as possible (according to census record) apartment or house number(s); street, village, town or city; district, region, province or state; country; and postal or zip code.
- **Contact addresses:** Provide permanent or temporary residence(s), which is not address according to census record.

Identification document, passport, or other travel document issued by respectable organization or agency: (please provide as detail as possible and attach copy of such document(s) (if any))

- **Type:** Describe the document type, for example: social security card, alien registration card, national ID card, tax payer ID card, passport, If document is of another type, please describe in writing.
- **Number:** Please provide document number
- **Issued by:** Indicate the issuing authority, for example national, regional or local authorities.
- **Other detail:** Please provide other related detail.

Pseudonyms, nicknames, diminutives, and aliases/ Also-Known-As

Means other names not accepted by law and not sufficient for accurate and positive identification of the individual concerned

- **Type:** Describe type of pseudonyms, nicknames, aliases. If other please describe in writing.
- **Detail:** provide pseudonyms, nicknames, diminutives, and aliases/ Also-Known-As
- **Supporting information on pseudonyms or aliases:** including name in original script or other script (provide type or script in writing)
- **Additional information:** (if any)

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Name of parents

- **Father's name:** full name of father both in Thai and original script (if any).
- **Mother's name:** full name of mother both in Thai and original script (if any).

Marital Status:

- **Spouse/partner's name:** specify if the individual married or partnered (de facto relationship), using full name of spouse/partner in Thai and original script (if any).
- **Child:** specify if the individual has child, using full name of child in Thai and original script (if any).

Part 2: Basis for Listing and Statement of Case

Agency submitting the request shall tick at least *one box* below that applies to individual in Part 1 of this request and specify if the individual committed an act relating to terrorism or financing of terrorism

Part 3: Information, fact, act or evidence of act of individual under Part 1

Agency submitting the request shall gather information, fact, act or evidence of act of individual under Part 1 as much as possible and *shall be an act up until present*. The case being submitted to AMLO shall be summarized in precision, complete, correct and current to facilitate the correct designation by the Committee.

Status of individual (please provide as detail as possible and attach copy of such document(s) (if possible))

- **wanted/warranted:** specify if the individual is wanted or subject to arrest warrant, if yes, specify number of the arrest warrant, name and location of the court, type of offense, effective and end date of the arrest warrant, including other detail.
- **Detained:** specify if the individual is detained, if yes, specify starting and end date of the detention, place and cause for detention including other detail.
- **Convicted/ Sentenced:** specify if the individual is convicted or sentenced, or other legal status, if yes, specify number and date of the verdict, name and location of the court, type of offense, detail, appellant, expected date of release or following action such as deportation, extradition, including other details.
- **Other:** Please specify detail regarding detention, imprisonment, deportation, release or flea from arrest warrant or has not been prosecuted. In case the person has not committed an offense, specify place of residence in hometown or other place (if any)

Relationship with commission of the offense and other designated person

Please provide as detail as possible and attach copy of such document(s) (if any) by providing information, fact, act or evidence showing that the act relating to terrorism or terrorist financing is being committed at present or being an agent or being under control of such person and whether he is related to other designated person (if provide space is not sufficient, use annex 1)

Other information which would benefit the consideration for designation

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Please provide other information, fact or evidence (if any) to support the fact under “Status of individual” or “relationship with offender and other designated person”, as the case may be. (if provide space is not sufficient, use annex 2)

Part 4: Cooperation with other agencies

The committee’s consideration would bases on complete, correct and up-to-date information.

Part 5: Contact Point of designating agency

Please provide contact detail of contact point of designating agency for this designation and also certify that information above is correct and, factual. Additional documents for consideration must be attached, and certified.

Remarks: designating information shall include full name in Thai or English (if any) national ID number, Passport number, in case of foreigner and date of birth (if any)

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