

## PB02 – Bank General Data on AML

| Box N° | Name                                  | Description of the Data to be Reported   | Format   |
|--------|---------------------------------------|--|--|
| 1      | Date                                  | This request for information will be made on a semiannual basis. The closing dates will be June 30 and December 31 of each year. The information must be submitted to the Superintendency of Banks of Panama by the thirty-first (31 <sup>st</sup> ) day of the month following the closing date of each period. | Date format<br>YYYYMMDD  |
| 2      | Bank Code                             | Bank code assigned by the SBP.   | 3-character text   |
| 3      | Prepared by                           | Name of the person filling out the document.   | 50-character text. Do not use null values.   |
| 4      | Position                              | Position held by the person filling out the document.  | 50-character text. Do not use null values.   |
| 5      | Compliance Officer's Name             | Name of the Compliance Officer according to the last notification submitted to the Superintendency.  | 50-character text. Do not use null values.   |
| 6      | Compliance Officer's telephone number | Organization's telephone number at which the Compliance Officer can be contacted.  | 20-character text. Do not use null values.   |
| 7      | Entity Type                           | Banks are classified as follows: 01 – Parent Company; 02 – Branch Office; and 03 – Subsidiary.   | 2-character text   |
| 8      | Economic Group's Name                 | If the entity is a Panama-based parent company for a financial/economic group, please indicate the name of the financial/economic group. If not applicable, please enter NA.   | 100-character text. Do not leave blank spaces or use null values. If the bank does not belong to a financial/ economic group insert NA |
| 9      | Number of regulated affiliates        | If the Bank is a Parent Company, indicate the number of regulated affiliates and subsidiaries  | Integer  |
| 10     | Number of affiliates abroad           | If the Bank is a Parent Company with affiliates or subsidiaries abroad, indicate the number of regulated affiliates abroad.  | Integer  |

TRANSLATION

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| 11     | Number of nonregulated affiliates   | If the Bank is a Parent Company with nonregulated affiliates or subsidiaries within the country or abroad, insert the number.                                     | Integer  |
| 12     | Holding Company Name                | Insert the name of the Parent Company to which the bank belongs. If not applicable, insert NA.  | 100-character text. Do not leave blank spaces or use null values. If the bank does not belong to a financial/ economic group insert NA |
| 13     | Total Employees                     | Insert the total number of employees directly hired by the Bank, regardless of the type of relationship (hired, contracted, etc.)                                 | Integer  |
| 14     | Alternate Compliance Officer's Name | In case of the temporary absence of the Principal Compliance Officer, insert the name of the person taking on the Compliance Officer's role and responsibilities. | 50-character text. Do not use null values.   |
| 15     | Total compliance structure          | Number of persons working in the AML/FT/FPWMD risk unit/area.   | Integer  |
| 16     | Monitoring tool name                | Name of the monitoring tool the Bank uses for ML/FT/FPWMD risk prevention   | 50-character text. Do not use null values.   |
| 17     | Monitoring tool version             | If this tool has different versions, insert the current version the Bank uses.  | 10-character text. Do not use null values.   |
| 18     | Monitoring tool implementation date | (YYYYMMDD) Date on which the Bank started using the monitoring tool.  | Date format<br>YYYYMMDD  |
| 19     | Monitoring tool last update date    | (YYYYMMDD) Date on which the monitoring tool was last updated.  | Date format<br>YYYYMMDD  |

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|--------|---|---|---|
| 20     | Monitoring tool supplier  | If applicable, insert the name of the monitoring tool supplier.   | 50-character text. Do not use null values |
| 21     | Total warnings produced during the surveyed period                      | Number of warnings produced during the surveyed period.   | Integer                                   |
| 22     | Total warnings processed during the surveyed period                     | Number of warnings processed during the surveyed period.  | Integer                                   |
| 23     | Total warnings pending during the surveyed period                       | Number of warnings pending processing during the surveyed period.   | Integer                                   |
| 24     | Total number of employees assigned to analyze warnings                  | Number of employees assigned to analyze warnings.   | Integer                                   |
| 25     | Total number of Suspicious Transaction Reports issued during the period | Number of Suspicious Transaction Reports (STRs) sent to the Financial Analysis Unit (UAF) during the surveyed period. | Integer                                   |
| 26     | Currency Transaction Reports (CTR) during the period                    | Number of Currency Transaction Report (CTRs) for the period.  | Integer                                   |
| 27     | Currency Transaction Reports (CTR) during the period (monetary value)   | Insert the total amount of the cash transactions reported in CTRs, according to the surveyed period.                  | Numeric with 2 decimals                   |