

that its projected revenues as a result of this transaction will not result in the creation of a Class II or Class I rail carrier.

The transaction was scheduled to be consummated on March 1, 2003.

If the verified notice contains false or misleading information, the exemption is void *ab initio*. Petitions to reopen the proceeding to revoke the exemption under 49 U.S.C. 10502(d) may be filed at any time. The filing of a petition to revoke will not automatically stay the transaction.

An original and 10 copies of all pleadings, referring to STB Finance Docket No. 34313, must be filed with the Surface Transportation Board, 1925 K Street, NW., Washington, DC 20423-0001. In addition, a copy of each pleading must be served on Larry E. LeMond, 202 Mason Avenue, P.O. Box 312, Cape Charles, VA 23310.

Board decisions and notices are available on our Web site at [www.stb.dot.gov](http://www.stb.dot.gov).

Decided: March 3, 2003.

By the Board, David M. Konschnik,  
Director, Office of Proceedings.

**Vernon A. Williams,**  
Secretary.

[FR Doc. 03-5628 Filed 3-10-03; 8:45 am]

BILLING CODE 4915-00-P

## DEPARTMENT OF THE TREASURY

### Office of the Comptroller of the Currency

### Office of Thrift Supervision

### FEDERAL RESERVE SYSTEM

### FEDERAL DEPOSIT INSURANCE CORPORATION

### NATIONAL CREDIT UNION ADMINISTRATION

### Financial Crimes Enforcement Network; Agency Information Collection Activities; Submission for OMB Review; Comment Request; Suspicious Activity Report

**ACTION:** Submission for OMB review; joint comment request.

**SUMMARY:** In accordance with the requirements of the Paperwork Reduction Act of 1995, FinCEN, OCC, OTS, FDIC, and NCUA hereby give notice that they plan to submit to the Office of Management and Budget (OMB) requests for review of the

information collections described below. Pursuant to 5 CFR 1320.16 the Board of Governors of the Federal Reserve System (the Board) hereby announces the Board's approval of the information collection and plan to submit its supporting documentation to OMB. The above-mentioned agencies are collectively referred to as the "agencies" throughout this notice.

On November 4, 2002, the agencies, requested public comment on the minor revision of the Suspicious Activity Report (SAR). The OCC also requested comments on all information collections contained in 12 CFR part 21. The agencies are making the changes proposed and are making an additional change suggested by the commenters. None of the changes will impose substantial additional burden on respondents.

**DATES:** Written comments should be received on or before April 10, 2003.

**ADDRESSES:** Interested parties are invited to submit written comments to any or all of the agencies. All comments, which should refer to the OMB control number(s), will be shared among the agencies. Direct all written comments as follows:

**FinCEN:** Financial Crimes Enforcement Network, Department of the Treasury, P.O. Box 39, Vienna, VA 22183, Attention: 1506-0001, Revised SAR, Financial Institutions. Comments also may be submitted by electronic mail to the following Internet address: [regcomments@fincen.treas.gov](mailto:regcomments@fincen.treas.gov) with the caption in the body of the text, "Attention: 1506-0001, Revised SAR, Financial Institutions".

**OCC:** Public Information Room, Office of the Comptroller of the Currency, 250 E Street, SW., Mail stop 1-5, Attention: 1557-0180-2, Washington, DC 20219. In addition, comments may be sent by facsimile transmission to (202) 874-4448, or by electronic mail to [regs.comments@occ.treas.gov](mailto:regs.comments@occ.treas.gov). Due to delays in paper mail in the Washington area, commenters are encouraged to submit comments by fax or e-mail. You can make an appointment to inspect comments by calling (202) 874-5043.

**OTS:** Information Collection Comments, Chief Counsel's Office, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552; send a facsimile transmission to (202) 906-6518; or send an e-mail to [infocollection.comments@ots.treas.gov](mailto:infocollection.comments@ots.treas.gov). OTS will post comments and the related index on the OTS Internet site at <http://www.ots.treas.gov>. In addition, interested persons may inspect comments at the Public Reading Room, 1700 G Street, NW., by appointment. To

make an appointment, call (202) 906-5922, send an e-mail to [publicinfo@ots.treas.gov](mailto:publicinfo@ots.treas.gov), or send a facsimile transmission to (202) 906-7755.

**Board:** Comments may be mailed to Ms. Jennifer J. Johnson, Secretary, Board of Governors of the Federal Reserve System, 20th Street and Constitution Avenue, NW., Washington, DC 20551. However, because paper mail in the Washington area and at the Board of Governors is subject to delay, please consider submitting your comments by e-mail to [regs.comments@federalreserve.gov](mailto:regs.comments@federalreserve.gov), or faxing them to the office of the Secretary at 202-452-3819 or 202-452-3102. Comments addressed to Ms. Johnson may also be delivered to the Board's mail facility in the West Courtyard between 8:45 a.m. and 5:15 p.m., located on 21st Street between Constitution Avenue and C Street, NW. Members of the public may inspect comments in Room MP-500 between 9 a.m. and 5 p.m. on weekdays pursuant to 261.12, except as provided in 261.14, of the Board's Rules Regarding Availability of Information, 12 CFR 261.12 and 261.14.

**FDIC:** Written comments should be addressed to Robert E. Feldman, Executive Secretary, Attention: Comments/Legal, Federal Deposit Insurance Corporation, 550 17th Street, NW, Washington, DC 20429. Comments may be hand-delivered to the guard station at the rear of the 550 17th Street Building (located on F Street), on business days between 7 a.m. and 5 p.m. [FAX number (202) 898-3838; Internet address: [comments@fdic.gov](mailto:comments@fdic.gov)].

Comments may be inspected and photocopied in the FDIC Public Information Center, Room 100, 801 17th Street, NW., Washington, DC between 9 a.m. and 4:30 p.m., on business days.

**NCUA:** Clearance Officer: Mr. Neil M. McNamara, (703) 518-6447, National Credit Union Administration, 1775 Duke Street, Alexandria, VA 22314-3428, Fax No. 703-518-6489, E-mail: [mcnamara@ncua.gov](mailto:mcnamara@ncua.gov).

**OMB:** Joseph F. Lackey, Jr., Office of Information and Regulatory Affairs, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

**FOR FURTHER INFORMATION CONTACT:** You may request additional information or a copy of the collection by contacting:

**FinCEN:** Russell Stephenson, 202-354-6400 (ORP);

**OCC:** Jessie Dunaway, OCC Clearance Officer, or Camille Dixon, Legislative and Regulatory Activities Division, Office of the Comptroller of the

transaction, ESHR will assume operations over the line and BBR will cease its operations over the line.

Currency, 250 E Street, SW., Washington DC 20219, (202) 874-5090.

**OTS:** Richard Stearns, Enforcement Deputy Counsel, Office of Enforcement, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552, (202) 906-7966.

**Board:** Herbert A. Biern, Senior Associate Director, Division of Banking Supervision and Regulation, (202) 452-2620. For users of Telecommunications Devices for the Deaf (TDD) only, contact 202-263-4869, Board of Governors of the Federal Reserve System, 20th Street and Constitution Avenue, NW., Washington, DC 20551.

**FDIC:** Tamara R. Manly, Legal Division, FDIC, 550 17th Street, NW., Washington, DC 20429, (202) 898-7453.

**NCUA:** NCUA Clearance Officer, Mr. Neil M. McNamara, (703) 518-6447, or John K. Ianno, Office of General Counsel, (703) 518-6540.

#### SUPPLEMENTARY INFORMATION:

**Title:** Suspicious Activity Report. (The OCC is renewing all information collections covered under the information collection titled: "(MA)-Minimum Security Devices and Procedures, Reports of Suspicious Activities, and Bank Secrecy Act Compliance Program (12 CFR 21).") FinCEN is renewing 31 CFR 103.18.

#### OMB Numbers

**FinCEN:** 1506-0001.

**OCC:** 1557-0180.

**OTS:** 1550-0003.

**FDIC:** 3064-0077.

**Board:** 7100-0212.

**NCUA:** 3133-0094.

#### Form Numbers

**FinCEN:** TD F 90-22.47.

**OCC:** None.

**OTS:** 1601.

**Board:** FR 2230.

**FDIC:** 6710/06.

**NCUA:** 2362.

**Abstract:** In 1985, the agencies issued procedures to be used by banks, thrifts, credit unions, their holding companies, and certain other financial institutions operating in the United States to report known or suspected criminal activities to the appropriate law enforcement agencies and the agencies. Beginning in 1994, the agencies completely redesigned the reporting process. This redesign resulted in the existing SAR, which became effective in April 1996.<sup>1</sup>

**Agencies Current Actions:** FinCEN and the financial regulators issued a joint initial **Federal Register** notice (60-day notice) regarding the revised SAR on November 4, 2002, (67 FR 67239). A copy of the revised SAR, together with the instructions to the form, was published as part of the 60-day notice. The comments received in response to the 60-day notice (discussed in the next paragraph) were carefully considered. This notice proposed three minor revisions to the form. In Part III Suspicious Activity Information, block 35 Summary characterization of suspicious activity, two new check boxes would be added, one to indicate "Terrorist Financing" and another to indicate "Identity Theft." The third revision is an update to the "Safe Harbor" wording in the instructions, to reflect changes by the USA Patriot Act. These additions will improve the form's usefulness to law enforcement and the agencies.

**Comments Received and Agency Action Taken.** The agencies received five generally favorable comment letters from two banking trade associations, a credit union trade association, a bank holding company, and a credit card bank. The comments and recommendations for the most part involved policy issues rather than comments affecting the form's data collection elements. Four commenters suggested that examples of suspicious activities be included with the form. Rather than including numerous examples on the form itself, FinCEN and the financial regulators decided to include a reference to the SAR Activity Review in the instructions. The SAR Activity Review is readily available on FinCEN's Web site (<http://www.fincen.gov>), contains examples and definitions, and is updated regularly. This addition was made to Part V, the "Narrative." One commenter suggested alternate language for the safe harbor provisions. After careful review, FinCEN and the financial regulators elected to retain the language presented in the initial **Federal Register** notice. One commenter recommended expanding the reporting categories in Part III, block 35 and that FinCEN address the issue of supplemental SARs. This commenter also requested clarification on whether transactions that are reported to the Office of Foreign Assets Control (OFAC) should also be reported on a SAR. This commenter's recommendations have merit and will be taken under consideration by FinCEN

and the financial regulators for possible implementation at a later date.

**Special Instructions:** The SAR form included in this final **Federal Register** notice is effective July 1, 2003. The SAR form included in this **Federal Register** is for training and system configuration use only. *Do not use this form to report suspicious activity before July 1, 2003.* Depository institutions should use the current SAR dated June 2000, until June 30, 2003.

Depository institutions reporting possible terrorist financing suspicious activity must file a SAR as indicated above, but should also contact FinCEN's Financial Institutions Hotline (866) 556-3974 to report the activity.

For individual copies of the form, call FinCEN's Regulatory Helpline (800) 949-2732 after April 15, 2003, for individual copies of the form. For information about obtaining bulk copies of the form, or access to a fill-in version, visit the IRS's Internet Web site at <http://www.irs.gov> after April 15, 2003. Copies of both the fill-in version and individual copies may also be obtained on the FinCEN Web site at <http://www.fincen.gov> after April 15, 2003.

**Type of Review:** Revision of a currently approved collection.

**Affected Public:** Businesses, for-profit institutions, and non-profit institutions.

#### Estimated Number of Respondents

**FinCEN:** 22,600.<sup>2</sup>

**OCC:** 2,252.

**OTS:** 990.

**Board:** 10,000.

**FDIC:** 8,000.

**NCUA:** 9,300.

#### Estimated Total Annual Responses

**FinCEN:** 637,500.

**OCC:** 54,172.

**OTS:** 20,804.

**Board:** 11,162.

**FDIC:** 16,018.

**NCUA:** 2,961.

#### Estimated Total Annual Burden

The agencies have estimated 30 minutes per form.

**FinCEN:** 31,750 hours.<sup>3</sup>

**OCC:** 32,906 hours.

**OTS:** 10,402 hours.

**Board:** 5,581 hours.

**FDIC:** 8,009 hours.

**NCUA:** 1,480 hours.

An agency may not conduct or sponsor, and a person is not required to

<sup>1</sup> The report is authorized by the following rules: 31 CFR 103.21 (FinCEN); 12 CFR 21.11 (OCC); 12 CFR 563.180 (OTS); 12 CFR 208.20 (Board); 12 CFR 353.3 (FDIC); 12 CFR 748.1 (NCUA). The rules were issued under the authority of 31 U.S.C. 5318(g) (FinCEN); 12 U.S.C. 93a, 1818, 1881-84, 3401-22, 31 U.S.C. 5318 (OCC); 12 U.S.C. 1463 and 1464 (OTS); 12 U.S.C. 324, 334, 6114a, 1844(b) and (c),

3015(c)(2) and 3106(a) (Board); 12 U.S.C. 93a, 1818, 1881-84, 3401-22 (FDIC); 12 U.S.C. 1766(a), 1789(a) (NCUA).

<sup>2</sup> Many respondents included in this estimate are also counted in the agencies' estimates.

<sup>3</sup> A respondent need only file one form. The estimated burden per form is 30 minutes; this estimate does not allocate time between agencies when copies of the form are filed to satisfy the rules of more than one agency.

respond to, a collection of information unless the collection of information displays a valid OMB control number. A respondent must retain the SAR and supporting documentation for five years. Generally, information collected pursuant to the Bank Secrecy Act is confidential, but may be shared as provided by law with regulatory and law enforcement authorities.

*Request for Comments:* Comments are invited on:

(a) Whether the collection of information is necessary for the proper performance of the functions of the agencies, including whether the information shall have practical utility;

(b) The accuracy of the agencies' estimate of the burden of the collection of information;

(c) Ways to enhance the quality, utility, and clarity of the information to be collected;

(d) Ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and

(e) Estimates of capital or start-up costs and costs of operation, maintenance and purchase of services to provide information.

Dated: March 3, 2003.

**James F. Sloan,**

*Director, Financial Crimes Enforcement Network.*

Dated: February 20, 2003.

**Mark J. Tenhundfeld,**

*Assistant Director, Legislative and Regulatory Activities Division, Office of the Comptroller of the Currency.*

Dated: February 26, 2003.

**Deborah Dakin,**

*Deputy Chief Counsel, Regulations and Legislation Division, Office of Thrift Supervision.*

Board of Governors of the Federal Reserve System, February 24, 2003.

**Jennifer J. Johnson,**

*Secretary of the Board, Board of Governors of the Federal Reserve System.*

Dated at Washington, DC, this 5th day of February, 2003.

By Order of the Board of Directors.

Federal Deposit Insurance Corporation.

**Robert E. Feldman,**

*Executive Secretary.*

By the National Credit Union Administration Board on February 24, 2003.

**Becky Baker,**

*Secretary of the Board.*

**BILLING CODE 4810-02-P**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <h1 style="margin: 0;">Suspicious Activity Report</h1> <p style="margin: 0;">July 2003<br/>Previous editions will not be accepted after December 31, 2003</p> <p style="margin: 0; background-color: black; color: white; text-align: center; padding: 2px;"><b>ALWAYS COMPLETE ENTIRE REPORT (see instructions)</b></p>                                                                                                                                                                              |                                    | <div style="background-color: black; color: white; text-align: center; width: 20px; margin: 0 auto;">1</div> <div style="font-size: small; margin-top: 10px;"> FRB: FR 2230 OMB No. 7100-0212<br/> FDIC: 6710/06 OMB No. 3064-0077<br/> OCC: 8010-9,8010-1 OMB No. 1557-0180<br/> OTS: 1601 OMB No. 1550-0003<br/> NCUA: 2362 OMB No. 3133-0094<br/> TREASURY: TD F 90-22.47 OMB No. 1506-0001 </div> |
| 1 Check box below only if correcting a prior report.<br><input type="checkbox"/> Corrects Prior Report (see instruction #3 under "How to Make a Report")                                                                                                                                                                                                                                                                                                                                              |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Part I Reporting Financial Institution Information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| 2 Name of Financial Institution                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                    | 3 EIN                                                                                                                                                                                                                                                                                                                                                                                                 |
| 4 Address of Financial Institution                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                    | 5 Primary Federal Regulator<br>a <input type="checkbox"/> Federal Reserve d <input type="checkbox"/> OCC<br>b <input type="checkbox"/> FDIC e <input type="checkbox"/> OTS<br>c <input type="checkbox"/> NCUA                                                                                                                                                                                         |
| 6 City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 7 State                            | 8 Zip Code                                                                                                                                                                                                                                                                                                                                                                                            |
| 9 Address of Branch Office(s) where activity occurred <input type="checkbox"/> Multiple Branches (include information in narrative, Part V)                                                                                                                                                                                                                                                                                                                                                           |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| 10 City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 11 State                           | 12 Zip Code                                                                                                                                                                                                                                                                                                                                                                                           |
| 13 If institution closed, date closed<br>MM / DD / YYYY                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| 14 Account number(s) affected, if any<br>a _____ Closed? <input type="checkbox"/> Yes <input type="checkbox"/> No c _____ Closed? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>b _____ <input type="checkbox"/> Yes <input type="checkbox"/> No d _____ <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                       |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Part II Suspect Information</b> <span style="float: right;"><input type="checkbox"/> Suspect Information Unavailable</span>                                                                                                                                                                                                                                                                                                                                                                        |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| 15 Last Name or Name of Entity                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                    | 16 First Name                                                                                                                                                                                                                                                                                                                                                                                         |
| 17 Middle                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| 18 Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                    | 19 SSN, EIN or TIN                                                                                                                                                                                                                                                                                                                                                                                    |
| 20 City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 21 State                           | 22 Zip Code                                                                                                                                                                                                                                                                                                                                                                                           |
| 23 Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| 24 Phone Number - Residence (include area code)<br>( )                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                    | 25 Phone Number - Work (include area code)<br>( )                                                                                                                                                                                                                                                                                                                                                     |
| 26 Occupation/Type of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 27 Date of Birth<br>MM / DD / YYYY | 28 Admission/Confession?<br>a <input type="checkbox"/> Yes b <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                              |
| 29 Forms of Identification for Suspect:<br>a <input type="checkbox"/> Driver's License/State ID b <input type="checkbox"/> Passport c <input type="checkbox"/> Alien Registration d <input type="checkbox"/> Other _____<br>Number _____ Issuing Authority _____                                                                                                                                                                                                                                      |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| 30 Relationship to Financial Institution:<br>a <input type="checkbox"/> Accountant d <input type="checkbox"/> Attorney g <input type="checkbox"/> Customer j <input type="checkbox"/> Officer<br>b <input type="checkbox"/> Agent e <input type="checkbox"/> Borrower h <input type="checkbox"/> Director k <input type="checkbox"/> Shareholder<br>c <input type="checkbox"/> Appraiser f <input type="checkbox"/> Broker i <input type="checkbox"/> Employee l <input type="checkbox"/> Other _____ |                                    |                                                                                                                                                                                                                                                                                                                                                                                                       |
| 31 Is the relationship an insider relationship? a <input type="checkbox"/> Yes b <input type="checkbox"/> No<br>If Yes specify: c <input type="checkbox"/> Still employed at financial institution e <input type="checkbox"/> Terminated<br>d <input type="checkbox"/> Suspended f <input type="checkbox"/> Resigned                                                                                                                                                                                  |                                    | 32 Date of Suspension, Termination, Resignation<br>MM / DD / YYYY                                                                                                                                                                                                                                                                                                                                     |

**Part III Suspicious Activity Information****2**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>33 Date or date range of suspicious activity</b><br>From ____ / ____ / ____ To ____ / ____ / ____<br><small>MM DD YYYY MM DD YYYY</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <b>34 Total dollar amount involved in known or suspicious activity</b><br>\$ _____ .00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
| <b>35 Summary characterization of suspicious activity:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| a <input type="checkbox"/> Bank Secrecy Act/Structuring/<br>Money Laundering<br>b <input type="checkbox"/> Bribery/Gratuity<br>c <input type="checkbox"/> Check Fraud<br>d <input type="checkbox"/> Check Kiting<br>e <input type="checkbox"/> Commercial Loan Fraud<br>s <input type="checkbox"/> Other _____<br><small>(type of activity)</small>                                                                                                                                                                                                                                                                                |  | f <input type="checkbox"/> Computer Intrusion<br>g <input type="checkbox"/> Consumer Loan Fraud<br>h <input type="checkbox"/> Counterfeit Check<br>i <input type="checkbox"/> Counterfeit Credit/Debit Card<br>j <input type="checkbox"/> Counterfeit Instrument (other)<br>k <input type="checkbox"/> Credit Card Fraud<br>l <input type="checkbox"/> Debit Card Fraud<br>m <input type="checkbox"/> Defalcation/Embezzlement<br>n <input type="checkbox"/> False Statement<br>o <input type="checkbox"/> Misuse of Position or Self Dealing<br>p <input type="checkbox"/> Mortgage Loan Fraud<br>q <input type="checkbox"/> Mysterious Disappearance<br>r <input type="checkbox"/> Wire Transfer Fraud<br>t <input type="checkbox"/> Terrorist Financing<br>u <input type="checkbox"/> Identity Theft |  |
| <b>36 Amount of loss prior to recovery (if applicable)</b><br>\$ _____ .00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | <b>37 Dollar amount of recovery (if applicable)</b><br>\$ _____ .00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| <b>39 Has the institution's bonding company been notified?</b><br>a <input type="checkbox"/> Yes    b <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <b>38 Has the suspicious activity had a material impact on, or otherwise affected, the financial soundness of the institution?</b><br>a <input type="checkbox"/> Yes    b <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |
| <b>40 Has any law enforcement agency already been advised by telephone, written communication, or otherwise?</b><br>a <input type="checkbox"/> DEA                      d <input type="checkbox"/> Postal Inspection    g <input type="checkbox"/> Other Federal<br>b <input type="checkbox"/> FBI                              e <input type="checkbox"/> Secret Service        h <input type="checkbox"/> State<br>c <input type="checkbox"/> IRS                                f <input type="checkbox"/> U.S. Customs        i <input type="checkbox"/> Local<br>j <input type="checkbox"/> Agency Name (for g, h or i) _____ |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| <b>41 Name of person(s) contacted at Law Enforcement Agency</b><br>_____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>42 Phone Number (include area code)</b><br>(       )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <b>43 Name of person(s) contacted at Law Enforcement Agency</b><br>_____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>44 Phone Number (include area code)</b><br>(       )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <b>Part IV Contact for Assistance</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| <b>45 Last Name</b><br>_____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <b>46 First Name</b><br>_____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| <b>48 Title/Occupation</b><br>_____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | <b>47 Middle</b><br>_____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
| <b>49 Phone Number (include area code)</b><br>(       )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | <b>50 Date Prepared</b><br>____ / ____ / ____<br><small>MM DD YYYY</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| <b>51 Agency (if not filed by financial institution)</b><br>_____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |

| Part V Suspicious Activity Information Explanation/Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 3 |
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| <p><b>Explanation/description of known or suspected violation of law or suspicious activity.</b></p> <p>This section of the report is <b>critical</b>. The care with which it is written may make the difference in whether or not the described conduct and its possible criminal nature are clearly understood. Provide below a chronological and <b>complete</b> account of the possible violation of law, including what is unusual, irregular or suspicious about the transaction, using the following checklist as you prepare your account. <b>If necessary, continue the narrative on a duplicate of this page.</b></p> <p>a <b>Describe</b> supporting documentation and retain for 5 years.</p> <p>b <b>Explain</b> who benefited, financially or otherwise, from the transaction, how much, and how.</p> <p>c <b>Retain</b> any confession, admission, or explanation of the transaction provided by the suspect and indicate to whom and when it was given.</p> <p>d <b>Retain</b> any confession, admission, or explanation of the transaction provided by any other person and indicate to whom and when it was given.</p> <p>e <b>Retain</b> any evidence of cover-up or evidence of an attempt to deceive federal or state examiners or others.</p> | <p>f <b>Indicate</b> where the possible violation took place (e.g., main office, branch, other).</p> <p>g <b>Indicate</b> whether the possible violation is an isolated incident or relates to other transactions.</p> <p>h <b>Indicate</b> whether there is any related litigation; if so, specify.</p> <p>i <b>Recommend</b> any further investigation that might assist law enforcement authorities.</p> <p>j <b>Indicate</b> whether any information has been excluded from this report; if so, why?</p> <p>k If you are correcting a previously filed report, describe the changes that are being made.</p> <p>For Bank Secrecy Act/Structuring/Money Laundering reports, include the following additional information:</p> <p>l <b>Indicate</b> whether currency and/or monetary instruments were involved. If so, provide the amount and/or description of the instrument (for example, bank draft, letter of credit, domestic or international money order, stocks, bonds, traveler's checks, wire transfers sent or received, cash, etc.).</p> <p>m <b>Indicate</b> any account number that may be involved or affected.</p> |   |
| <p>Tips on SAR Form preparation and filing are available in the SAR Activity Review at <a href="http://www.fincen.gov/pub_reports.html">www.fincen.gov/pub_reports.html</a></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |   |

Paperwork Reduction Act Notice: The purpose of this form is to provide an effective and consistent means for financial institutions to notify appropriate law enforcement agencies of known or suspected criminal conduct or suspicious activities that take place at or were perpetrated against financial institutions. This report is required by law, pursuant to authority contained in the following statutes. Board of Governors of the Federal Reserve System: 12 U.S.C. 324, 334, 611a, 1844(b) and (c), 3105(c) (2) and 3106(a). Federal Deposit Insurance Corporation: 12 U.S.C. 93a, 1818, 1881-84, 3401-22. Office of the Comptroller of the Currency: 12 U.S.C. 93a, 1818, 1881-84, 3401-22. Office of Thrift Supervision: 12 U.S.C. 1463 and 1464. National Credit Union Administration: 12 U.S.C. 1766(a), 1786(q). Financial Crimes Enforcement Network: 31 U.S.C. 5318(g). Information collected on this report is confidential (5 U.S.C. 552(b)(7) and 552a(k)(2), and 31 U.S.C. 5318(g)). The Federal financial institutions' regulatory agencies and the U.S. Departments of Justice and Treasury may use and share the information. Public reporting and recordkeeping burden for this information collection is estimated to average 30 minutes per response, and includes time to gather and maintain data in the required report, review the instructions, and complete the information collection. Send comments regarding this burden estimate, including suggestions for reducing the burden, to the Office of Management and Budget, Paperwork Reduction Project, Washington, DC 20503 and, depending on your primary Federal regulatory agency, to Secretary, Board of Governors of the Federal Reserve System, Washington, DC 20551; or Assistant Executive Secretary, Federal Deposit Insurance Corporation, Washington, DC 20429; or Legislative and Regulatory Analysis Division, Office of the Comptroller of the Currency, Washington, DC 20219; or Office of Thrift Supervision, Enforcement Office, Washington, DC 20552; or National Credit Union Administration, 1775 Duke Street, Alexandria, VA 22314; or Office of the Director, Financial Crimes Enforcement Network, Department of the Treasury, 2070 Chain Bridge Road, Vienna, VA 22182. The agencies may not conduct or sponsor, and an organization (or a person) is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**Suspicious Activity Report  
Instructions**

**Safe Harbor** Federal law (31 U.S.C. 5318(g)(3)) provides complete protection from civil liability for all reports of suspicious transactions made to appropriate authorities, including supporting documentation, regardless of whether such reports are filed pursuant to this report's instructions or are filed on a voluntary basis. Specifically, the law provides that a financial institution, and its directors, officers, employees and agents, that make a disclosure of any possible violation of law or regulation, including in connection with the preparation of suspicious activity reports, "shall not be liable to any person under any law or regulation of the United States, any constitution, law, or regulation of any State or political subdivision of any State, or under any contract or other legally enforceable agreement (including any arbitration agreement), for such disclosure or for any failure to provide notice of such disclosure to the person who is the subject of such disclosure or any other person identified in the disclosure".

**Notification Prohibited** Federal law (31 U.S.C. 5318(g)(2)) requires that a financial institution, and its directors, officers, employees and agents who, voluntarily or by means of a suspicious activity report, report suspected or known criminal violations or suspicious activities may not notify any person involved in the transaction that the transaction has been reported.

**In situations involving violations requiring immediate attention, such as when a reportable violation is ongoing, the financial institution shall immediately notify, by telephone, appropriate law enforcement and financial institution supervisory authorities in addition to filing a timely suspicious activity report.**

**WHEN TO MAKE A REPORT:**

1. All financial institutions operating in the United States, including insured banks, savings associations, savings association service corporations, credit unions, bank holding companies, nonbank subsidiaries of bank holding companies, Edge and Agreement corporations, and U.S. branches and agencies of foreign banks, are required to make this report following the discovery of:
  - a. **Insider abuse involving any amount.** Whenever the financial institution detects any known or suspected Federal criminal violation, or pattern of criminal violations, committed or attempted against the financial institution or involving a transaction or transactions conducted through the financial institution, where the financial institution believes that it was either an actual or potential victim of a criminal violation, or series of criminal violations, or that the financial institution was used to facilitate a criminal transaction, and the financial institution has a substantial basis for identifying one of its directors, officers, employees, agents or other institution-affiliated parties as having committed or aided in the commission of a criminal act regardless of the amount involved in the violation.
  - b. **Violations aggregating \$5,000 or more where a suspect can be identified.** Whenever the financial institution detects any known or suspected Federal criminal violation, or pattern of criminal violations, committed or attempted against the financial institution or involving a transaction or transactions conducted through the financial institution and involving or aggregating \$5,000 or more in funds or other assets, where the financial institution believes that it was either an actual or potential victim of a criminal violation, or series of criminal violations, or that the financial institution was used to facilitate a criminal transaction, and the financial institution has a substantial basis for identifying a possible suspect or group of suspects. If it is determined prior to filing this report that the identified suspect or group of suspects has used an "alias," then information regarding the true identity of the suspect or group of suspects, as well as alias identifiers, such as drivers' licenses or social security numbers, addresses and telephone numbers, must be reported.
  - c. **Violations aggregating \$25,000 or more regardless of a potential suspect.** Whenever the financial institution detects any known or suspected Federal criminal violation, or pattern of criminal violations, committed or attempted against the financial institution or involving a transaction or transactions conducted through the financial institution and involving or aggregating \$25,000 or more in funds or other assets, where the financial institution believes that it was either an actual or potential victim of a criminal violation, or series of criminal violations, or that the financial institution was used to facilitate a criminal transaction, even though there is no substantial basis for identifying a possible suspect or group of suspects.
  - d. **Transactions aggregating \$5,000 or more that involve potential money laundering or violations of the Bank Secrecy Act.** Any transaction (which for purposes of this subsection means a deposit, withdrawal, transfer between accounts, exchange of currency, loan, extension of credit, purchase or sale of any stock, bond, certificate of deposit, or other monetary instrument or investment security, or any other payment, transfer, or delivery by, through, or to a financial institution, by whatever means effected) conducted or attempted by, at

or through the financial institution and involving or aggregating \$5,000 or more in funds or other assets, if the financial institution knows, suspects, or has reason to suspect that:

- i. The transaction involves funds derived from illegal activities or is intended or conducted in order to hide or disguise funds or assets derived from illegal activities (including, without limitation, the ownership, nature, source, location, or control of such funds or assets) as part of a plan to violate or evade any law or regulation or to avoid any transaction reporting requirement under Federal law;
- ii. The transaction is designed to evade any regulations promulgated under the Bank Secrecy Act; or
- iii. The transaction has no business or apparent lawful purpose or is not the sort in which the particular customer would normally be expected to engage, and the financial institution knows of no reasonable explanation for the transaction after examining the available facts, including the background and possible purpose of the transaction.

The Bank Secrecy Act requires all financial institutions to file currency transaction reports (CTRs) in accordance with the Department of the Treasury's implementing regulations (31 CFR Part 103). These regulations require a financial institution to file a CTR whenever a currency transaction exceeds \$10,000. If a currency transaction exceeds \$10,000 and is suspicious, the institution must file both a CTR (reporting the currency transaction) and a suspicious activity report (reporting the suspicious or criminal aspects of the transaction). If a currency transaction equals or is below \$10,000 and is suspicious, the institution should only file a suspicious activity report.

**2. Computer Intrusion.** For purposes of this report, "computer intrusion" is defined as gaining access to a computer system of a financial institution to:

- a. Remove, steal, procure, or otherwise affect funds of the institution or the institution's customers;
- b. Remove, steal, procure or otherwise affect critical information of the institution including customer account information; or
- c. Damage, disable or otherwise affect critical systems of the institution.

For purposes of this reporting requirement, computer intrusion does not mean attempted intrusions of websites or other non-critical information systems of the institution that provide no access to institution or customer financial or other critical information.

3. A financial institution is required to file a suspicious activity report no later than 30 calendar days after the date of initial detection of facts that may constitute a basis for filing a suspicious activity report. If no suspect was identified on the date of detection of the incident requiring the filing, a financial institution may delay filing a suspicious activity report for an additional 30 calendar days to identify a suspect. In no case shall reporting be delayed more than 60 calendar days after the date of initial detection of a reportable transaction.
4. This suspicious activity report does not need to be filed for those robberies and burglaries that are reported to local authorities, or (except for savings associations and service corporations) for lost, missing, counterfeit, or stolen securities that are reported pursuant to the requirements of 17 CFR 240.17f-1.

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**HOW TO MAKE A REPORT:**

1. Send each completed suspicious activity report to:

**Detroit Computing Center, P.O. Box 33980, Detroit, MI 48232-0980**

2. For items that do not apply or for which information is not available, leave blank.
3. If you are correcting a previously filed report, check the box at the top of the report (line 1). Complete the report in its entirety and include the corrected information in the applicable boxes. Then describe the changes that are being made in Part V (Description of Suspicious Activity), line k.
4. **Do not include any supporting documentation with the suspicious activity report.** Identify and retain a copy of the suspicious activity report and all original supporting documentation or business record equivalent for five (5) years from the date of the suspicious activity report. All supporting documentation must be made available to appropriate authorities upon request.
5. If more space is needed to report additional suspects, attach copies of page 1 to provide the additional information. If more space is needed to report additional branch addresses, include this information in the narrative, Part V.
6. Financial institutions are encouraged to provide copies of suspicious activity reports to state and local authorities, where appropriate.



[FR Doc. 03-5649 Filed 3-10-03; 8:45 a.m.]

BILLING CODE 4810-02-C

## DEPARTMENT OF THE TREASURY

### Submission for OMB Review; Comment Request

March 5, 2003.

The Department of the Treasury has submitted the following public information collection requirement(s) to OMB for review and clearance under the Paperwork Reduction Act of 1995, Public Law 104-13. Copies of the submission(s) may be obtained by calling the Treasury Bureau Clearance Officer listed. Comments regarding this information collection should be addressed to the OMB reviewer listed and to the Treasury Department Clearance Officer, Department of the Treasury, Room 11000, 1750 Pennsylvania Avenue, NW., Washington, DC 20220.

**DATES:** Written comments should be received on or before April 10, 2003 to be assured of consideration.

*Bureau of the Public Debt (PD)*

*OMB Number:* 1535-0136.

*Form Number:* PD F 5410.

*Type of Review:* Reinstatement.

*Title:* Application for Refund of Purchase Price of United States Savings Bonds for Organizations.

*Description:* Used by an organization to request refund of purchase price of United States Savings Bonds.

*Respondents:* Business or other for-profit, Not-for-profit institutions.

*Estimated Number of Respondents:* 5,000.

*Estimated Burden Hours Per*

*Respondent:* 6 minutes.

*Frequency of Response:* On occasion.

*Estimated Total Reporting Burden Hours:* 500 hours.

*OMB Number:* 1535-0138.

*Form Number:* None.

*Type of Review:* Extension.

*Title:* New Treasury Direct.

*Description:* The information is requested to establish a new account and process transactions.

*Respondents:* Individuals or households.

*Estimated Number of Respondents:* 808,000.

*Estimated Burden Hours Per*

*Respondent:* 16 minutes.

*Frequency of Response:* On occasion.

*Estimated Total Reporting Burden Hours:* 231,075 hours.

*Clearance Officer:* Vicki S. Thorpe (304) 480-6553, Bureau of the Public Debt, 200 Third Street, Parkersburg, West VA 26106-1328.

*OMB Reviewer:* Joseph F. Lackey, Jr. (202) 395-7316, Office of Management

and Budget, Room 10235, New Executive Office Building, Washington, DC 20503.

**Lois K. Holland,**

*Departmental Reports Management Officer.*

[FR Doc. 03-5766 Filed 3-10-03; 8:45 am]

BILLING CODE 4810-39-P

## DEPARTMENT OF THE TREASURY

### Bureau of Engraving and Printing

#### Proposed Collection; Comment Request

**ACTION:** Notice and request for comments.

**SUMMARY:** The Department of the Treasury's Bureau of Engraving and Printing, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995, Public Law 104-13 (44 U.S.C. 3506(c)(2)(A)). Currently, the Bureau of Engraving and Printing within the Department of the Treasury is soliciting comments concerning survey research to support the Bureau's redesigned currency public education program. Written comments should be received on or before January 31, 2003 to be assured consideration. Direct all written comments to Pamela Grayson, Budget & Strategic Planning Office, Bureau of Engraving and Printing, Room 725-7A, Room 509-M, 14th and C Streets, SW, Washington, DC 20228.

Requests for additional information or copies of the form (s) and instructions should also be directed to Pam Grayson.

#### SUPPLEMENTARY INFORMATION:

*Title:* Redesignated Currency Development Survey.

*OMB Number:* New.

*Abstract:* The Bureau of Engraving and Printing requests approval to survey the public to help identify the most effective approaches for a public education campaign regarding the introduction of new redesigned currency. The campaign is intended to raise awareness of the new currency, maintain confidence in the U.S. currency and encourage authentication.

*Current Actions:* This is a new collection.

*Type of Review:* Emergency. The proposed survey research must be completed in February to allow sufficient time for the results to be incorporated into the education program

materials before the anticipated launch date.

*Affected Public:* The affected public includes all adult (18 or older) members of the U.S. population.

*Estimated Number of Respondents:* 1,950.

*Estimated Total Annual Burden Hours:* Estimated number of annual burden hours is 650.

*Request for Comments:* The Notice is soliciting comments from members of the public and affected agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

Dated: March 3, 2003.

**Ellen Gano,**

*Public Affairs Specialist, Office of Public Education, Bureau of Engraving and Printing.*

[FR Doc. 03-5767 Filed 3-10-03; 8:45 am]

BILLING CODE 4840-01-P

## DEPARTMENT OF THE TREASURY

### Bureau of Engraving and Printing

#### Proposed Collection; Comment Request

**ACTION:** Notice and request for comments.

**SUMMARY:** The Department of the Treasury's Bureau of Engraving and Printing, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995, Public Law 104-13 (44 U.S.C. 3506(c)(2)(A)). Currently, the Bureau of Engraving and Printing within the Department of the Treasury is soliciting comments concerning survey research designed to establish benchmark measures of awareness, confidence and behavior relating to the Bureau's redesigned currency program. Written