

**Statistical Questionnaire - Legal Professionals (as defined in the
AML/CFT Guidelines it refers to Law Firms, Foreign
Law Firms, Joint Law Venture and Foreign Lawyers)**

I - GENERAL INFORMATION

1. Name of legal professional

2. Reporting date:

3. Name(s) of Managing Partner(s) or Equivalent:

4. Name of Compliance Officer:

II- ENGAGING IN PRESCRIBED ACTIVITIES

If you answer NO to engaging in all the prescribed activities listed below you do not have to complete the remainder of the questionnaire but nonetheless need to send your response to the AGO for law firms and the FIU for other legal professionals. If you answer yes to engaging in any of the activities, please complete the entire questionnaire.

Do you engage in any of the following activities?	YES/NO
(i) Buying and selling of real estate;	
(ii) Managing of client money, securities or other assets;	
(iii) Management of bank, savings or securities accounts;	
(iv) Organisation of contributions for the creation, operation or management of legal persons such as a company, a foundation, a limited liability partnership or such other entity as may be prescribed;	
(v) Creating, operating or management of legal persons such as a company, a foundation, an association, a limited liability partnership or such other entity as may be prescribed ,or legal arrangements , and buying and selling of business entities; or	
(vi)Acting as a formation agent of a legal person with a view to assisting another person to incorporate, register or setup, as the case maybe, a company, a foundation, a limited liability partnership or such other entity as may be prescribed;	
(vii) Acting, or causing another person to act, as a director, as a secretary, as a partner or in any other similar position, as the case maybe, of a legal person such as a company, foundation, a limited liability partnership or such other entity as may be prescribed;	
viii) Providing a registered office, a business address or an accommodation,	

a correspondence or an administrative address for a legal person such as a company, a foundation, a limited liability partnership or such other entity as may be prescribed; or	
(ix)Acting, or causing for another person to act, as a nominee shareholder for another person.	

III - FIRM STRUCTURE AND FINANCIAL FACTORS

1. STRUCTURE:

a) Head office:	
i) Domestic: (Yes/No)	
ii) Overseas: (List country)	
b) No. of domestic offices, subsidiaries and affiliates:	
c) No. of Overseas offices, subsidiaries and affiliates: (list countries)	
d) Describe your ownership and organizational structure including your relationship to subsidiaries, affiliates and other licensed entities (add attachments if necessary)	
1.2 No. of partners/shareholders:	
1.3 Years in operation in Mauritius:	
1.4 Total clients:	
a) Mauritian	
b) Foreign	
1.5 Number of legal professionals working in firm/legal practice:	
2. FINANCIAL INFORMATION (Indicate MUR value)	
2.1 Total assets:	
2.2 Total gross revenue: (last financial year)	
2.3 Total revenue from specified activities:	
a) Total value of client financial assets managed or controlled by the legal professional (as at stated date)	
b) Total value of client "non-financial" assets managed or under the control of the legal professional	
c) Total value of financial transactions related to specified activities conducted on behalf of clients	

As applicable (not all services/transactions will involve an MUR amount)

IV. INHERENT RISK FACTORS	As at: (state date)		
	For Period Ended: (state period)		
The data below is only for Specified Activities			
1. CLIENT RISK	Number of clients	No. of Transactions	
1.1 Individuals			
a) Mauritian and Mauritius residents			
b) Non-Resident from jurisdictions that are not high risk			
c) Non-residents from high risk jurisdictions			
1.2 Legal persons & arrangements			
a) Mauritius			
b) Foreign from jurisdictions that are not high risk			
c) Foreign from high risk jurisdictions			
1.3 PEPs			
a) Mauritian and Mauritius residents			
b) Foreign			
1.4 Clients involving complex ownership structures			
1.5 Clients that are acting on behalf of a third party (including other professional intermediaries)			
1.6 High net worth clients			
1.7 Non-profit organizations			
a) Mauritian			
b) Foreign from jurisdictions that are not high risk			
c) Foreign from high risk jurisdictions			
1.8 Clients having a criminal background			
1.9 Any high risk client categories identified by the legal professional			
2. PRODUCTS, SERVICES AND TRANSACTION RISK (services provided for clients)	Number of clients	No. of Transactions	MUR Equivalent
2.1 Real estate transactions			
2.2 Managing of client money, securities or other assets			
2.3 Management of bank, savings or securities accounts			
2.4 Organizing or managing contributions for creation, operation or management of legal persons			
2.5 Creation, operation and management of legal persons			
2.6 Purchase and sale of business entities			
2.7 Acting as formation agent for legal persons			
2.8 Acting as nominee shareholder			
2.9 Acting as nominee director, secretary or partner			
2.10 Providing a registered office, business/administrative address or accommodation			
2.11 Acting as escrow agent (for real estate and any other purpose)			

3. GEOGRAPHIC RISK	Number of clients	No. of Transactions	MUR Equivalent
3.1 FATF and FATF style regional bodies countries identified as being high risk			
3.2 UN sanctioned countries (including for proliferation issues)			
3.3 High risk money laundering countries (esp. corruption, drug trafficking, etc.)			
3.4 Countries or regions at high risk of terrorism or terrorism financing			
3.5 Other high risk countries or regions as determined by Mauritius or other countries			

4. CHANNELS OF DELIVERY RISK	Number of clients	No. of Transactions	MUR Equivalent
4.1 Non-face-to-face clients taken on by firm			
4.2 Introduced clients and clients where client due diligence is performed by others			
4.3 Business conducted by proxy			
4.4 Types of payment accepted			
a) Cash			
b) Virtual currency/asset			
c) Precious metals and stones			
c) Other stored value (please specify)			

V. RISK MITIGATION

1. IMPLEMENTATION OF AML/CFT OBLIGATIONS	YES/PARTIALLY/ NO
1.1 Have you implemented internal controls and policies and procedures?	
1.2 Have you designated a compliance officer and MLRO?	
1.3 Have you conducted and documented a risk assessment?	
1.4 Have you identified and implemented mitigation measures to reduce higher risk situations?	
1.5 Have you conducted an AML/CFT internal audit?	
1.6 Have your trained professionals/employees on AML/CFT issues?	
1.7 Do you conduct the identification and verification of clients?	
1.8 Do you conduct enhanced due diligence in higher risk situations?	
1.9 Do you conduct enhanced due diligence for politically exposed persons?	
1.10 Do you maintain CDD and transactions records for 7 years?	
1.11 Have you established mechanisms to identify STRs?	

I confirm that the facts/ information provided in this document are true and accurate.

Name and Signature:

Designation:

Date: _____