

Enforcement Action Report System Entry Request

General Information

Name of Person: _____
Position/Title: _____
Date Action Commenced: _____
Date Action Finalized: _____
Status: _____
Offense: _____

Bank Information

Charter Number: _____
Bank Name: _____
Bank City and State: _____
Bank Country: _____

Application Information

Application Type: _____
Application Action: _____
Action Date: _____
CAIS Control Number: _____
Additional Comments:

EARS ACC NR: _____
DATE ENTERED ON EARS: _____