

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

**DOCUMENTATION ENCLOSED**

**CORPORATION**

Date: **August 18, 2023**  
To: Trade Authority, Program Manager  
Re: Participation in Structured Private Financial Opportunity  
Transaction code:

- **UNDERSTANDING THE DUE DILIGENCE CONVENTION ACT**
- **AFFIDAVIT REQUESTING INFORMATION**
- **CLIENT INFORMATION SHEET**
- **CORPORATE RESOLUTION**
- **LETTER OF INTENT**
- **LETTER OF CEASE & DESIST CONFIRMATION**
- **SOURCE OF FUNDS AFFIDAVIT**
- **AUTHORIZATION TO VERIFY FUNDS**
- **CONFIRMATION OF BANK OFFICER**
- **COPY OF BANKER'S BUSINESS CARD**
- **PASSPORT(S)**
- **PROOF OF FUNDS**
- **PROOF OF LIFE**
- **BCL**
- **RWA**

*E-mail, facsimile copies or photocopies of documents or agreements pertaining to this subject are declared and regarded as valid and*

Initials:

Page 1 of 29

Date: **18 August 2023**

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

*equal to the original, provided they are represented by proper signatories. Originals may be required upon request.*

### UNDERSTANDING THE DUE DILIGENCE CONVENTION ACT

IN ACCORDANCE WITH ARTICLES 2 THROUGH 5 OF THE DUE DILIGENCE CONVENTION AND THE FEDERAL BANKING COMMISSION CIRCULAR OF DECEMBER 1998, AND UNDER THE US PATRIOT ACT OF 2002, AS AMENDED IN FEBRUARY 2003 CONCERNING THE PREVENTION OF MONEY LAUNDERING AND 305 OF THE SWISS CRIMINAL CODE, THE FOLLOWING INFORMATION MAY BE SUPPLIED TO BANKS AND/OR OTHER FINANCIAL INSTITUTIONS FOR PURPOSES OF VERIFICATION OF IDENTITY AND ACTIVITIES OF THE CLIENT DESCRIBED BELOW, AND THE NATURE AND ORIGIN OF THE FUNDS WHICH ARE TO BE UTILIZED. THE FOREGOING IS SUBJECT TO AGREEMENT BY ALL PARTIES TO WHOM THIS INFORMATION IS PROVIDED THAT THEY ARE OBLIGATED TO RESPECT THE PRIVACY RIGHTS OF THE CLIENT AND ALL INDIVIDUALS DESCRIBED HEREIN, AS WELL AS THE GENERALLY ACCEPTED PROFESSIONAL STANDARDS RELATING TO THE MAINTENANCE OF CONFIDENTIAL INFORMATION, AND TO TAKE ALL APPROPRIATE PRECAUTIONS TO PROTECT THE CONFIDENTIALITY OF THE INFORMATION CONTAINED HEREIN, THIS LEGAL OBLIGATION SHALL REMAIN IN FULL FORCE INDEFINITELY WITHOUT RESTRICTION. I AM REQUIRED TO INFORM YOU THAT UNDER THE UK MONEY LAUNDERING REGULATIONS OF 2007: [TTP://WWW.LEGISLATION.GOV.UK/UKSI/20072157/CONTENTS/MADE-THE-PSN01AA](http://www.legislation.gov.uk/UKSI/20072157/CONTENTS/MADE-THE-PSN01AA) PREVENTION OF MONEY LAUNDERING AND COUNTERING THE FINANCING OF TERRORISM SINGAPORE

[HTTPS://WWW.MAS.GOV.SG/REGULATION/NOTICES/PSN01AA---TRANSITIONAL-NOTICE-FOR-ACCOUNT-ISSUANCE-SERVICES](https://www.mas.gov.sg/regulation/notices/psn01aa---transitional-notice-for-account-issuance-services)

THE: HKMA ANTI MONEY LAUNDERING ACT 23/09/2019 [HTTPS://WWW.ELEGISLATION.GOV.HK/HK/CAP615](https://www.elegislation.gov.hk/hk/cap615)

WE ARE REQUIRED TO RETAIN ALL FILES AND COMMUNICATIONS REGARDING THIS CASE AND ULTIMATELY IF CALLED UPON TO HAND OVER THE SAME TO THE RELEVANT AUTHORITIES. ANY AND ALL INFORMATION IS SAFEGUARDED UNDER UK DATA PROTECTION ACT 1998 AND WILL NOT BE DISCLOSED UNLESS ORDERED TO DO SO BY OURT ORDER. THE CODE STATES THAT A PERSON CONVICTED OF BANK FRAUD: MAY BE FINED UP TO ONE MILLION DOLLARS: MAY RECEIVE A PRISON SENTENCE OF UP TO 30 YEARS AND LOSE PASSPORT PRIVILEGES FOR LIFE. THE COMPANY WE USE IS TRANSUNION GROUP [HTTP://WWW.TRANSUNION.CO.UK/PRODUCTS-AND-SERVICES/FRAUD-AND-ID/AML-GUIDELINES](http://www.transunion.co.uk/products-and-services/fraud-and-id/aml-guidelines)

**(All Documents must be signed in wet blue ink \_no electronic signatures)**  
**This document must be Notarized or Apostatized or Witnessed by a Judge and returned in the original color**

I, **(NAME)**, have read and accepted the above as of this date: **August 18, 2023**

**All Signatures to be signed in wet blue ink (no electronic signatures)**  
Name / Title:

Initials:

Page 2 of 29

Date: **18 August 2023**

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

Company:	
Passport Number:	
Country of Issuance:	

Initials:

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

## AFFIDAVIT REQUESTING INFORMATION

Date: **August 18, 2023**  
To: Trade Authority, Program Manager  
Re: Participation in Structured Private Financial Opportunity  
Transaction code:

Dear Sir,

I, **(NAME)**, the undersigned, on behalf of **(COMPANY NAME)**, do hereby affirm that I have requested specific information about Private Placement Opportunities and or the Participation in Investment Programs. The confidential information presented, received, and learned is not for the solicitation of funds, nor is it an offering of any kind, but is for my general knowledge. I confirm that I have requested the information of my own free will and choice, and further confirm that no party has solicited me in any way. I hereby agree to keep all information received from you strictly confidential, private, and proprietary, and that I will not disclose it to any other third party.

I, **(NAME)**, further affirm that any funds or assets I decide to place are done so at my own specific initiative, risk, and authorization with full consideration and without duress. I further affirm that the information received is intended solely for my PRIVATE & CONFIDENTIAL USE ONLY. I am a sophisticated investor by all definitions of that classification known to me; I make my own investment decisions, and have legally acquired assets available. I, hereby reaffirm, under penalty of perjury that I have requested information from you and your organization and that you have not solicited me in any manner.

I, **(NAME)**, understand that the contemplated transaction is strictly one of Private Placement and is in no way relying upon existing regulations in relation to the United States Securities Act of 1933 as amended, or related regulations, and does not involve the buy and sell of securities. I further declare that I am not a licensed securities broker or government employee and understand that neither are you or your organization. I mutually agree that this Private Placement Transaction is exempt from the securities act.

I, **(NAME)**, understand and agree that the ICC NON-DISCLOSURE and NON-CIRCUMVENTION rules apply to this affidavit and business relationship, and hereby agree to the current application standards of the International Chamber of Commerce, Paris, France which rules are made a part hereof by this reference.

I, **(NAME)**, under penalty of perjury, with full corporate and individual responsibility, hereby irrevocably, confirm that neither myself, nor anyone else associated with my organization, my corporation, or the individual investor are working for any Agencies of any Government. I further state under penalty of perjury that I am not involved in any Government entrapment operation.

I, **(NAME)**, under penalty of perjury, with full corporate and individual responsibility, hereby irrevocably, confirm that neither myself, nor anyone else associated with my organization or corporation have been convicted of a felony, either within the United States or anywhere in the world where that crime would

Initials:

Page 4 of 29

Date: **18 August 2023**

**Investor Code:**

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

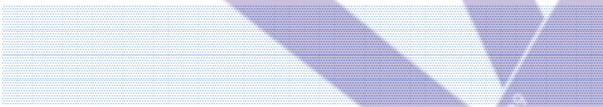
be considered equal to a US felony. To the best of my knowledge I am not nor are any of my associates within my organization or corporation considered to be terrorists or on any watch list with the United States Department of Homeland Security.

I, **(NAME)**, agree that all email and facsimile transmitted documents shall be treated as original documents. I further agree that in all cases where plural might apply where singular tense is used it is so applied.

I, **(NAME)**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: **August 18, 2023**

For and on behalf of **(NAME OF COMPANY)**

SEAL OF COMPANY



**All Signatures to be signed in wet blue ink (no electronic signatures)**

Name / Title:	
Company:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	

Initials:

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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

## CLIENT INFORMATION SHEET

Directions: This document must be completed in full. If a line item does not pertain then insert the term: "N/A" (non-applicable).

### Corporate Information

Full Name of Corporation:

Date of Incorporation:

Incorporated in (City/State/Country):

Registration Number:

Board of Directors (Name & Title):

Officers (Name & Title):

Shareholders (List all shareholders owning more than 5 % of all outstanding shares of Corporation):

### Location of Address: Registered Address (Corporation)

Full Name of Corporation:

Street Address:

City:

State:

Country:

Postal Code:

### Location of Address: Mailing Address (Corporation)

Full Name of Corporation:

Street Address:

City:

State:

Country:

Postal Code:

### Contact Information (Corporation)

Telephone Number:

Fax Number:

Mobile Number:

Email Address:

Skype ID:

Initials:

Page 6 of 29

Date: 18 August 2023

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

**Financial Information (Corporation)**

Annual Income of Corporation:  
Liquid Assets of Corporation:  
Net Worth of Corporation:  
Investment Experience (in years) of Corporation:

**Languages / Translator**

Languages:  
Does the Signatory speak English?  
If No, Name of Translator:  
Telephone Number:  
Email Address:  
Skype ID:

**Legal Advisor**

Full Name:  
Company:  
Address:  
City:  
State:  
Country:  
Postal Code:  
Telephone Number:  
Email Address:  
Skype ID:

**Personal Information of Officer(s) of Corporation / Passport Information**

(Please attach copy of corporate resolutions adopted by the Board of Directors appointing and authorizing said officer(s) to represent and legally bind the corporation)

*\* Duplicate the section below for each Director.*

First Name:  
Middle Name:  
Last Name:  
Gender:  
Date of Birth:  
Social Security Number:  
Country of Citizenship:  
Languages:

Initials:

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

**Passport Information of Officer(s) of Corporation**

*\*Please attach copy of photo and signature page of passport*

Passport Number:

Date of Issue:

Date of Expiry:

Issuing Authority:

**Location of Address: Home-Legal Residence (Officer(s) of Corporation)**

*(Please attach copy of utility bill)*

Full Name of Officer:

Street Address:

City:

State:

Country:

Postal Code:

*(Below, duplicate the section above for each Director)*

Initials:



Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

**CLIENT ACCOUNT WHERE PROFITS TO BE PAID**

**Bank coordinates for client funds to be transferred to, MUST BE CLIENTS ACCOUNT.**

Beneficiary:	
Bank Name:	
Bank Address:	
SWIFT:	
Account Name:	
Account No:	
ABA / IBAN No:	
Bank Officer:	
Bank Officer Phone No.:	
Bank Officer E-mail:	

*or to appointed Paymaster*

Paymaster	
Designation	
Paymaster address	
Nationality	
Paymaster E-mail	
Bank name	
Bank address	
Swift Code	
Account name	
Account No.	
IBAN	
Account signatory	
Bank officer	
Bank Officer Phone:	
Bank officer e-mail	

**EMAIL a notification immediately upon each tranche/ transfer payment together with the transaction code/s: ..... – .....e-mail..... PRE ADVICE FIRST**

**TEXT MESSAGE:**

**The SWIFT or CLEARSTREAM text message covering all remittances shall clearly state the following:**

**“same day transfer and immediate credit. Remitter is known to us. This transfer is with full banking responsibility and we are satisfied as to the source of the funds sent to us. Cleared, clean, lien free and unencumbered funds, earned from financial consulting fees on commercial enterprises of non-criminal and non-terrorist origins, known by transaction code”.**

Initials:

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

**Investment**

Funds available for this transaction:

Type of currency:

Origin of funds:

Are these funds free and clear of all liens, encumbrances and third-party interests:

I, **(NAME)**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: **August 18, 2023**

For and on behalf of **(NAME OF COMPANY)**

SEAL OF COMPANY

All Signatures to be signed in wet blue ink (no electronic signatures)

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

Initials:

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

## CORPORATE RESOLUTION

All of the directors of **(COMPANY NAME)** below listed were in attendance, in person or by telephone conference. General discussion was then held concerning the issue, and all aspects of the same, were fully explained in detail to the satisfaction of the board members.

DIRECTOR Name/Title:	
Passport No.:	
DIRECTOR Name/Title:	
Passport No.:	
DIRECTOR Name/Title:	
Passport No.:	
SECRETARY Name/Title:	
Passport No.:	

The Board of Directors of **(COMPANY NAME)** an International Business Company incorporated on **(DATE)** in **(LOCATION)** in **(COUNTRY)**, with Registered Offices at **(ADDRESS)** in a meeting held on this the **(Day)** Day of **(MONTH)**, **(YEAR)**, adopted the following resolutions.

### RESOLUTION 1:

It is resolved that the Board of Directors of **(COMPANY NAME)** hereby authorizes: **(NAME)** holder of Passport Number **(NUMBER)** issued on **(DATE)**.

As our Managing Member, as the **(President-CEO etc)** who assigned authority, on our behalf stay and name, to instruct, negotiate, arrange, monitor, execute, manage and sign any and all agreements and/or necessary contracts with third parties pertinent to all financial transactions with bank instruments (securities/derivatives)

### RESOLUTION 2:

It is resolved that at this meeting of the Board of Directors that our Managing Member and in fact **(NAME)** acts for **(COMPANY NAME)** with regards to the afore said financial investment.

### RESOLUTION 3:

It is resolved that **(NAME)** is hereby authorized to act as our Financial Director for afore said purpose.

Initials:

Page 11 of 29

Date: 18 August 2023

**Investor Code:**

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

**RESOLUTION 4:**

It is resolved the Board of Directors of **(COMPANY NAME)** hereby authorized **(NAME)** to assume all authority, powers, duties, signatory rights and responsibilities on our behalf.

**RESOLUTION 5:**

It is resolved that **(NAME)** is hereby authorized to open a personal, corporate, trading, trust and/or custodial account in any bank, domestic or foreign and to sign such resolutions as may be required by such bank to accomplish the objective(s) as stated herein and to give irrevocable instructions to said bank(s) on our behalf.

I, **(NAME)**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: **August 18, 2023**

For and on behalf of **(NAME OF COMPANY)**

--

SEAL OF COMPANY

**All Signatures to be signed in wet blue ink (no electronic signatures)**

Name / Title:	
Company:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	

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SEAL OF COMPANY

**All Signatures to be signed in wet blue ink (no electronic signatures)**

Name / Title:	/ Secretary
Company:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	

Initials: 

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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

## LETTER OF INTENT

Date: August 18, 2023  
To: Trade Authority, Program Manager  
Re: Participation in Structured Private Financial Opportunity  
Transaction code:

Dear Sir,

I, **(NAME)**, the undersigned, on behalf of **(COMPANY NAME)**, hereby confirm under penalty of perjury, my full commitment and agreement to participate in an investment opportunity, subject to my acceptance of the terms, conditions and procedures that shall be outlined in the Private Placement Program.

Furthermore, I hereby warrant and represent that I have available for placement into the proposed investment, the sum of

**(SPELL AMOUNT) United States Dollars/Euro**  
**(\$/€ \_\_\_\_\_,000,000.00 USD/EURO)**

of clean, clear funds, free of any levy, liens or encumbrances and of non-criminal origin, and herewith attach documentary evidence of same. I hereby warrant and represent that the Rule of Full-disclosure has established these funds were legally obtained from non-criminal business or actions. I further confirm that I am the beneficial owner of these cash funds, that I have full signatory authority and control thereof, and that such funds are available for immediate placement at my sole discretion.

I confirm and acknowledge, with full responsibility, that neither your company nor anyone working on your behalf has solicited me; that the documents that I shall receive shall not be deemed to be a solicitation of funds in connection with an investment program; and, that I am approaching you voluntarily for the purpose of securing participation in a bona fide Secure Private Placement Program.

I am prepared to instruct my bank to act upon the funds as required pursuant to the specifics of this program. In the case of Blocked Funds, it is my understanding the funds will be blocked and or reserved in the account and they will remain, at all times, non-callable.

I hereby request information from you covering the terms, condition and procedures of a secured investment and look forward to commencing the transaction, upon my acceptance of the agreement.

Email, facsimile copies or photocopies of documents or agreements pertaining to this subject are declared and regarded as valid and equal to the original, provided they are represented by proper signatories. Originals may be obtained upon request.

Initials: \_\_\_\_\_

Page 13 of 29

Date: 18 August 2023

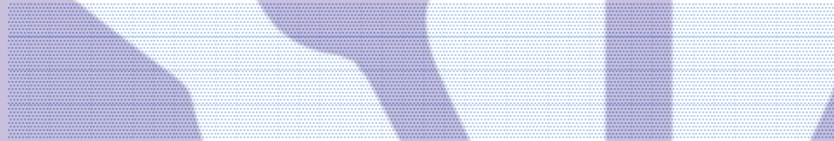
Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

I, **(NAME)**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: **August 18, 2023**

For and on behalf of **(NAME OF COMPANY)**

SEAL OF COMPANY



All Signatures to be signed in wet blue ink (no electronic signatures)

Name / Title:	
Company:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	

Initials:

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

## LETTER OF CEASE & DESIST CONFIRMATION

Date: August 18, 2023  
To: Trade Authority, Program Manager  
Re: Participation in Structured Private Financial Opportunity  
Transaction code:

Dear Sir,

I, **(NAME)**, bearing **(COUNTRY)** Passport No. **(NUMBER)**, duly authorized and full legally representative director for and on behalf of **(NAME OF COMPANY)**, give notice to have Cease and Desist and any/other group previous group approached in the past regarding our/my files

I, **(NAME)**, make a clear statement and confirm under risk and penalty of perjury not to have any other entities, associations, financial institutions, affiliates, intermediaries, groups or others with my /our permission nor any specific authorization to handle nor process any one of my /our documents as from August 18, 2023

And that; All previous entities, associations, financial institutions, affiliates, intermediaries, groups or others have been notified of such by the correspondent official Cease and Desist Letter communication. This exclusive authority and engagement shall continue fully effective until cancelled in writing by me.

I, **(NAME)**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: August 18, 2023

For and on behalf of **(NAME OF COMPANY)**

SEAL OF COMPANY

All Signatures to be signed in wet blue ink (no electronic signatures)

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

Initials:

Page 15 of 29

Date: 18 August 2023

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

### SOURCE OF FUNDS AFFIDAVIT

Date: **August 18, 2023**  
To: Trade Authority, Program Manager  
Re: Participation in Structured Private Financial Opportunity  
Transaction code:

Dear Sir,

I, **(NAME)**, bearing **(COUNTRY)** Passport No. **(NUMBER)**, do solemnly swear/attest the following statements to be true.

I, **(NAME)**, declare under penalty of perjury and with full personal and legal responsibility under the International Court of Law that I legally hold the sum of

**(SPELL AMOUNT) United States Dollars**  
**(\$ \_\_\_\_\_,000,000.00 USD)**

and it is deposited in Account No **(ACCOUNT NUMBER)** at **(NAME OF THE BANK)**, located at **(ADDRESS OF BANK)**.

These funds were earned or acquired by or through -----**fill in complete history-WHO-WHAT-WHERE**-----  
-----

I further declare these funds are current and valid currency lawfully obtained and constitute clean, cleared funds of legitimate, non-criminal, commercial origin. There are no liens, contractual obligations or encumbrances of any kind against these funds.

I have full and complete, legal ownership of, and the unrestricted right and authority to pledge or otherwise utilize these funds. The funds are ready for transfer or release upon my instruction.

These funds are authentic and verifiable. I am not aware of any matter which could or might cause the non-validation of these funds and I hereby indemnify the Program Manager and/or assignees, intermediaries, or other parties involved, against any claims, demands, civil and/or criminal in nature, and liabilities, damages, or expenses including without limitation any attorney's fees which may arise, whether in whole or in part, caused by reason of reliance upon this sworn declaration.



**Investor Code:**

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

E-mail, facsimile copies or photocopies of documents or agreements pertaining to this subject are declared and regarded as valid and equal to the original, provided they are represented by proper signatories. Originals may be obtained upon request. I, **(NAME)**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: **August 18, 2023**

As the Investor:

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All Signatures to be signed in wet blue ink (no electronic signatures)

Name:	
Title:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	

Initials:

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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

## AUTHORIZATION TO VERIFY FUNDS

Date: August 18, 2023  
To: Trade Authority, Program Manager  
Re: Participation in Structured Private Financial Opportunity  
Transaction code:

Know all men, by these that I, **(NAME)**, the undersigned, on behalf of **(COMPANY NAME)**, at the address shown above, give you clear notice that you have my direct permission and full authority to do all matters necessary to confirm, verify, and authenticate my beneficially owned cash funds and/or application asset(s) and its associated good standing account status, in an amount of **(SPELL AMOUNT)** United States Dollars/EURO (**\$/€**\_\_\_\_,000,000.00 **USD/EURO**) on a bank to bank basis. The below stated beneficially owned account is of good, clean, and cleared cash funds obtained via legal means, and is currently available at the bank coordinates below:

Bank Name:	<b>(NAME OF THE BANK)</b>
Bank Address:	<b>(ADDRESS OF BANK)</b>
Account Name:	<b>(ACCOUNT NAME)</b>
Account Number:	<b>(ACCOUNT NUMBER)</b>
Account signatory:	<b>(ACCOUNT SIGNATORY)</b>
Bank Officer & Title:	<b>(BANK OFFICER / TITLE)</b>

**COPY OF THIS AUTHORIZATION WILL BE LODGED AND PRESENTED TO MY BANK OFFICER.**

In witness hereof I, **(NAME)**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: **August 18, 2023**

For and on behalf of **(NAME OF COMPANY)**

SEAL OF COMPANY

All Signatures to be signed in wet blue ink (no electronic signatures)

Name / Title:	
Company:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	

C.C.: **(NAME OF BANK AND BANK OFFICER)**

Initials:

Page 18 of 29

Date: 18 August 2023

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

## LETTER OF CONFIRMATION OF BANK OFFICER

Date: August 18, 2023  
To: Trade Authority, Program Manager  
Re: Participation in Structured Private Financial Opportunity  
Transaction code:

Dear Sir,

I, **(NAME)**, bearing **(COUNTRY)** Passport No. **(NUMBER)**, duly authorized and full legally representative director for and on behalf of **(NAME OF COMPANY)**, do solemnly swear/attest with full legal responsibility, that the following named person is my actual and personal bank officer at **(NAME OF THE BANK)**, located at **(ADDRESS OF BANK)**, who will be available to cooperate with the trader for blocking of the following referenced bank account:

Bank Officer Name & Title:	<b>(BANK OFFICER / TITLE)</b>
Bank Officer Phone:	<b>(BANK OFFICER TELEPHONE)</b>
Account No:	<b>(ACCOUNT NUMBER)</b>

I, **(NAME)**, hereby swear under penalty of perjury, that I AM THE SIGNATORY of the account, that the funds belong to me, and the information provided herein is accurate and true as of this date: **August 18, 2023**

For and on behalf of **(NAME OF COMPANY)**



SEAL OF COMPANY

**All Signatures to be signed in wet blue ink (no electronic signatures)**

Name / Title:	
Company:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	

Initials:

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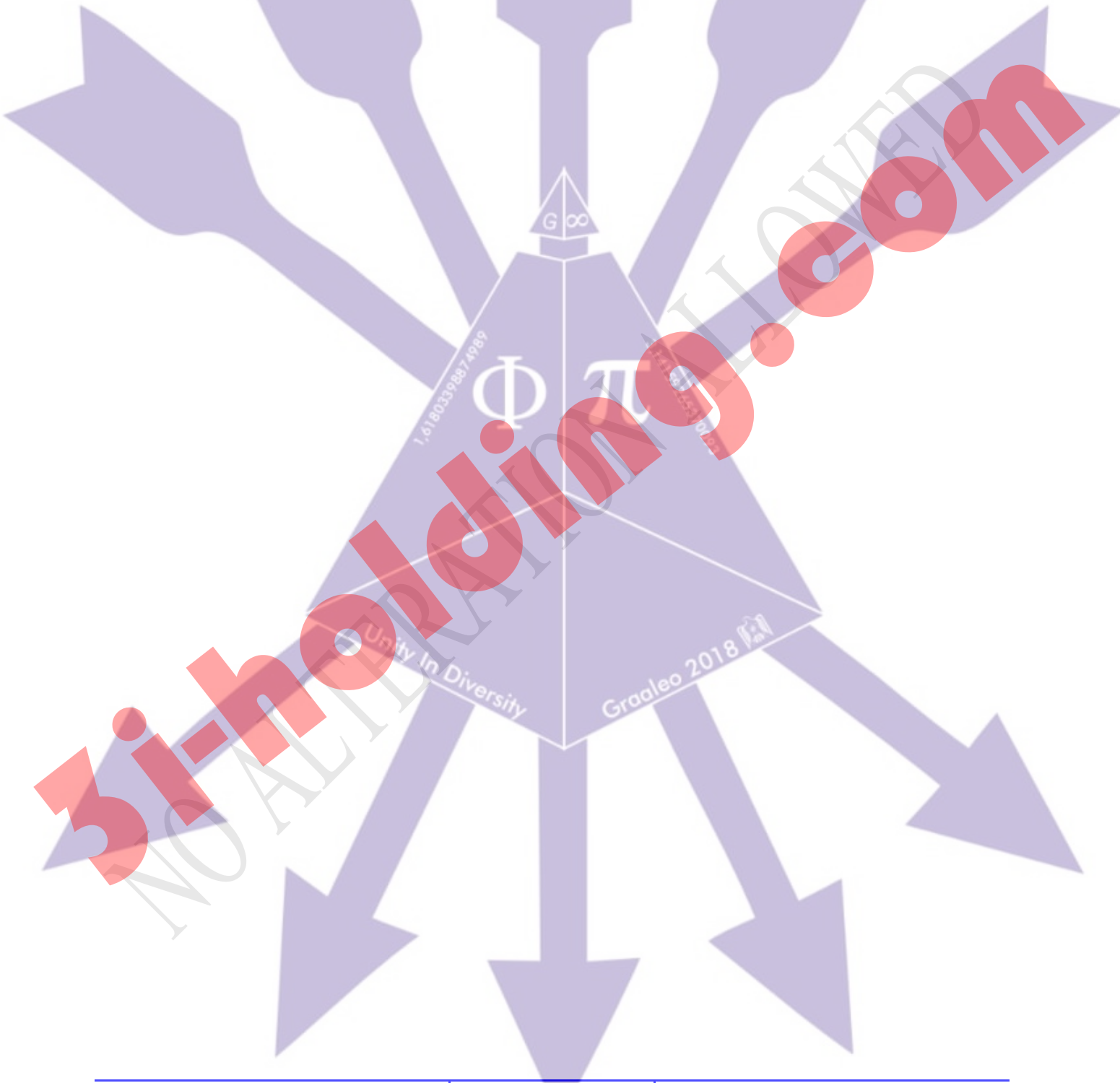
Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

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**2 COPY OF BANKER'S BUSINESS CARD SIGNED BY BANKER**

(VERY IMPORTANT TO INCLUDE THE BANKER'S BUSINESS CARD) SCAN NOT A PHOTO.



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Initials:

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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

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## PASSPORT

PROVIDE COLOR COPY ENLARGED (140%) TO THIS SIZE (8½ X 11 INCHES). PICTURE MUST BE CLEAR AND NOT DARK. ENLARGE & LIGHTEN (USING PHOTO SETTING). COLOR SCAN THE PASSPORT INTO YOUR COMPUTER AT A HIGH RESOLUTION IN THE JPEG FORMAT AND INSERT.

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Initials:

Page 21 of 29

Date: 18 August 2023

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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

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**POL**

proof of life photo holding passport to face and days newspaper

Initials:

Page 22 of 29

Date: 18 August 2023

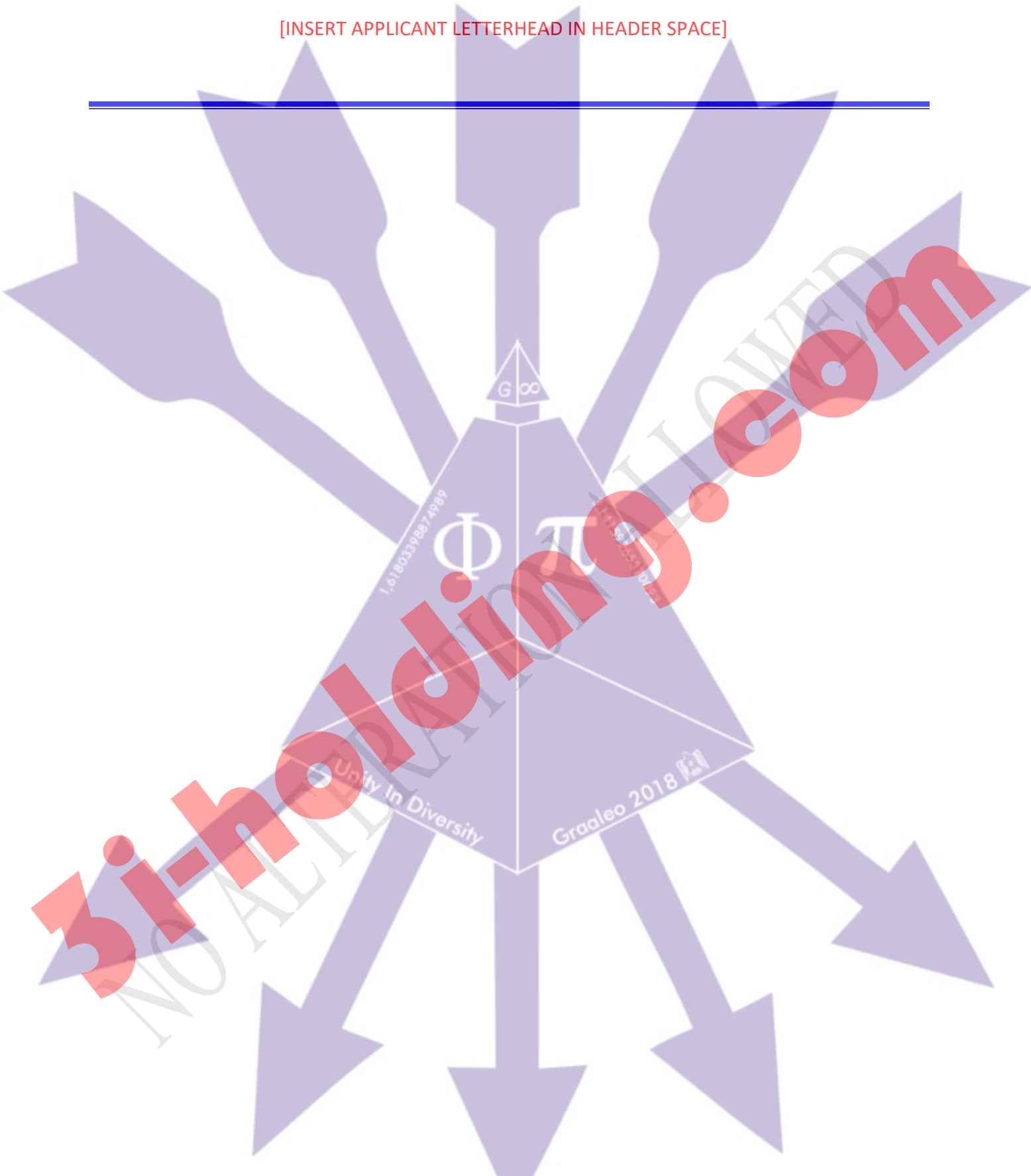
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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

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Initials:

Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

## PROOF OF FUNDS

### (1) A CURRENT BANK STATEMENT

fresh account statement, **signed by 2 bank officers**, fresh Bank Comfort Letter stating, that the funds (amount and account number need to be mentioned) are freely available and transferrable) signed by the same 2 bank officers with title and eventually their PIN

Initials:

Page 24 of 29

Date: 18 August 2023



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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

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(2) **BANK STATEMENTS ARE REQUIRED.**  
signed by the same 2 bank officers with title and PIN

Initials:

Page 25 of 29

Date: 18 August 2023

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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

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SCAN AND INSERT "KYC TRADE ON CASH - BCL" FILE

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Initials:

Page 26 of 29

Date: 18 August 2023

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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

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SCAN AND INSERT" KYC TRADE ON CASH - OPTION RWA PING" FILE  
IF APPLICABLE

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Initials:

Page 27 of 29

Date: 18 August 2023

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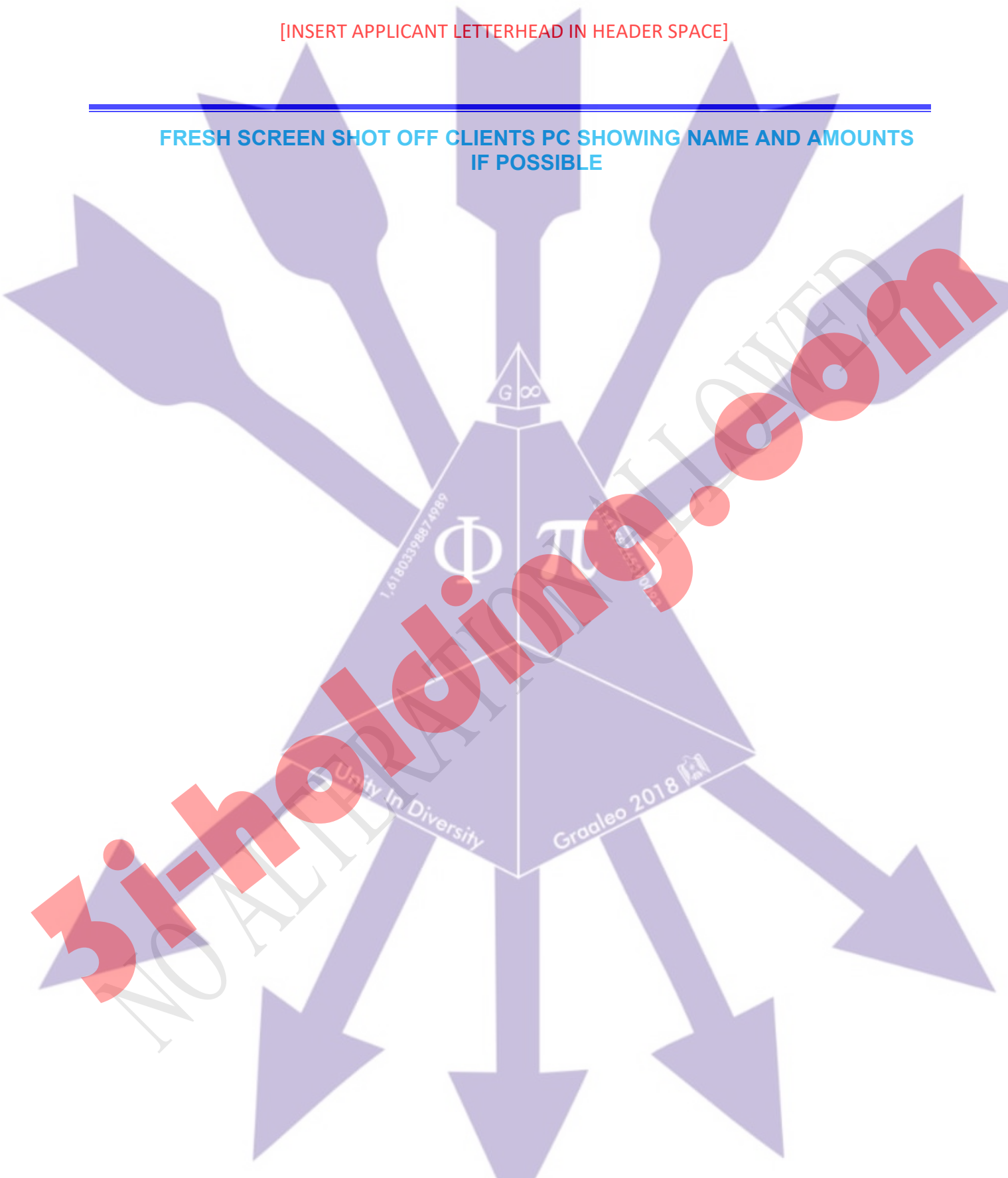
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Investor Code:

[INSERT APPLICANT LETTERHEAD IN HEADER SPACE]

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FRESH SCREEN SHOT OFF CLIENTS PC SHOWING NAME AND AMOUNTS  
IF POSSIBLE



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Initials:

Page 28 of 29

Date: 18 August 2023

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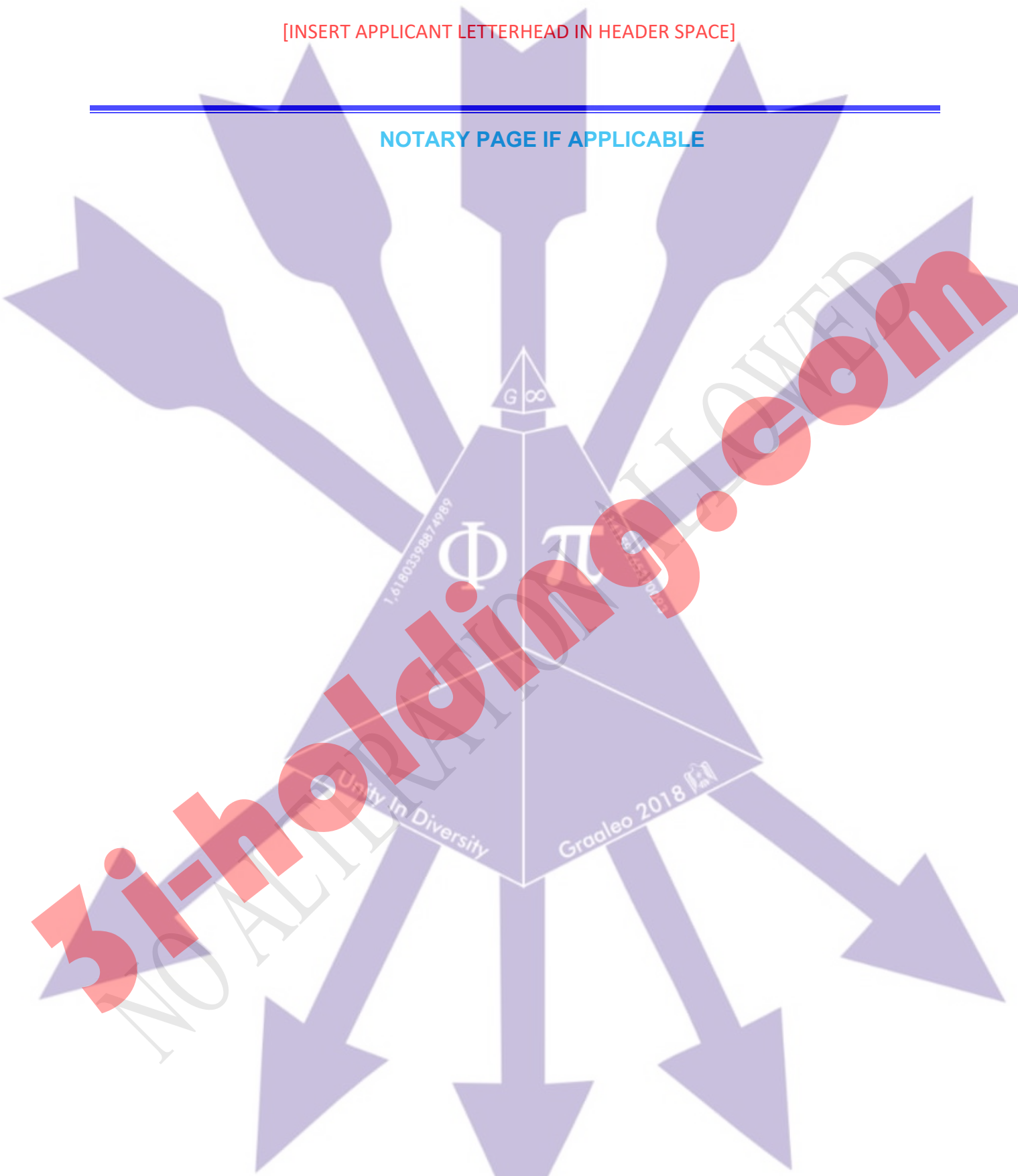
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Investor Code:

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NOTARY PAGE IF APPLICABLE



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Initials:

Page 29 of 29

Date: 18 August 2023

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