

Company Address:

Phone:

Email:



## 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):

Number:

Board of Directors (Name & Title):

Officers (Name & Title):

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

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

Full Name of Corporation:

Street Address: :

City:

State:

Country: USA

Postal Code:

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

Full Name of Corporation:

Street Address: :

City:

State: Florida

Country: USA

Postal Code:

### **Contact Information (Corporation)**

Telephone Number:

Fax Number: N/A

Email Address:

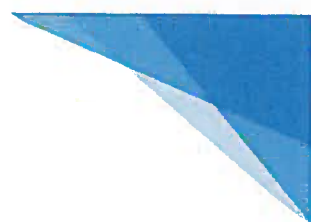
### **Financial Information (Corporation)**

Annual Income of Corporation:

Liquid Assets of Corporation: :

Net Worth of Corporation: :

Investment Experience (in years) of Corporatic



**Languages / Translator**

Languages: English  
Does the Signatory speak English? Yes  
Name of Translator: N/A  
Tel Number: N/A  
Email Address: N/A

**Legal Advisor**

Full Name:  
Company:  
Address:  
City:  
State:  
Country: USA  
Postal Code: Telephone  
Number:  
Fax Number:  
Email Address:

**Bank Information (Corporate)**

\* Please attach copy of account statement from bank

Bank Name (where funds are currently on deposit):

Street Address:  
City:  
Country: USA  
Postal Code:  
Account Name:  
Account Number:  
SWIFT Code:  
Account Signatory (1):  
Bank Officer # 1 Name: N/A

Telephone Number:

Fax Number: N/A



**Client Account where Profits to be paid**

Bank Name:

Street Address:

City:

State:

Country: USA

Postal Code:

Account Name:

Beneficiary:

Account Number:

Sort Code ABA No.:

SWIFT Code:

Officer Name:

Telephone Number:

Fax Number: N/A

**Investment**

Funds available for this transaction:

Type of currency: EURO/USD USD

Origin of funds: N/A

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

I, **Insert Signatory Name Here**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date:

**For and on behalf of Insert Company Name Here**

Signature:

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry

Country of Issuance: USA

Company Name:  
Company Name:  
Company Email:  
Company Number:  
Company #:

**\*Instruction for this sheet Please Provide two forms of ID it must be legible with in the picture upload.**

**Acceptable Forms: License/SSN Card/Passport**

**COLOR COPY OF PASSPORT OR DRIVER'S LICENSE**

