



## KYC FORM

### BASIC INFORMATION

PERSONAL / COMPANY NAME :

NATURE OF BUSINESS / PROFESSION

HOME / COMPANY ADDRESS:

SOURCE OF FUNDS:

EMAIL ADDRESSES:

PHONE NUMBER(s): OFFICE/CELL PHONE

### CONTACT PERSON INFORMATION (for Corporate only)

CONTACT PERSON'S NAME

PHONE NUMBER (s)

EMAIL ADDRESS

### MEANS OF IDENTIFICATION

International passport  Driver's license  National ID card  Voter's card

ID. No

### Copy of CAC documents should be attached for corporates , Copy of ID card for individuals

The undersigned hereby entirely and irrevocably agrees to indemnify Deal markers, its agents and respective affiliate's as well as its officers, directors and employees, Collateral managers, services and counsel against any loss, litigation or any other expense arising from the statement of untrue or incomplete information herein, or Due to the undersigned's failure to disclose any illegality in relation to the source of funds as requested by this document.

I, hereby confirm that that the information provided by me is accurate.

Signature & Date