

EXTENDED CLIENT INFORMATION SHEET

DATE :
CLIENT TRANSACTION CODE :
TO : Aletar (HK) Ltd.

THIS DOCUMENT IS SUBJECT THE REQUIREMENTS OF BASEL 1, BASEL 2, AND BASEL 3 AS WELL AS THE ECONOMIC AND INDUSTRIAL ESPIONAGE LAW OF THE INTERNATIONAL ECONOMIC COMMUNITY AND INCORPORATES BY REFERENCE THE STANDARDS OF THE INTERNATIONAL CHAMBER OF COMMERCE (ICC), 400, 500, 600, ON NON-DISCLOSURE, NON-CIRCUMVENTION, AND WORKING AGREEMENTS – INCLUDING PRIVACY, CONFIDENTIALITY, AND COOPERATION.

THIS DOCUMENT FURTHERMORE IS REQUIRED TO FULFILL THE FOLLOWING REQUIREMENTS

- CHAPTER 615 OF THE ANTI MONEY LAUNDERING AND COUNTER TERRORIST FINANCING ORDINANCE OF HONG KONG
- THE LAWS OF HONG KONG
- 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
- SWISS FEDERAL LAW ON COMBATING MONEY LAUNDERING IN THE FINANCIAL SECTOR (AMLA), OF OCTOBER 10, 1997,
- AGREEMENT ON THE SWISS BANKS CODE OF CONDUCT WITH REGARD TO THE EXERCISE OF DUE DILIGENCE (CDB), OF JANUARY 28, 1998,
- SWISS PENAL CODE, OF 1937, INCL. ARTICLES 251 [ON FALSIFYING DOCUMENTS] AND 305BIS/305TER [MONEY LAUNDERING AND LACK OF DUE DILIGENCE IN HANDLING MONEY],
- SWISS FEDERAL BANKING COMMISSION, MONEY LAUNDERING GUIDELINES, OF 1998

THE FOLLOWING INFORMATION MAY BE SUPPLIED TO BANKS AND/OR OTHER FINANCIAL INSTITUTIONS FOR PURPOSES OF PROPER EXECUTION OF THE OBLIGATION CONCERNING VERIFICATION OF IDENTITY AND ACTIVITIES OF THE CLIENT AND CONTRACTING PARTNERS AND THE BENEFICIAL OWNERS OR BENEFICIARIES AS ESTABLISHED IN THE ABOVE STATED LAWS, 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.

WHEN A FINANCIAL TRANSACTION IS INTRODUCED, UNDERTAKINGS HAVE TO BE GIVEN TO THE FINANCIAL INSTITUTIONS TO SUPPLY ALL THE INFORMATION CONCERNING THE OWNER AND/OR BENEFICIARIES IDENTIFICATION AND ACTIVITIES AND THE NATURE AND ORIGIN OF THE FUNDS, WHICH ARE TO BE DEPOSITED WITH THE FINANCIAL INSTITUTION. ALL PARTIES ARE OBLIGATED TO RESPECT PROFESSIONAL SECRECY AND TAKE ALL APPROPRIATE PRECAUTIONS TO PROTECT THE CONFIDENTIALITY OF THE INFORMATION IN HOLDS IN RESPECT TO THEIR ACTIVITIES. EACH PARTY HAS A LEGAL OBLIGATION TO RESPECT PROFESSIONAL SECRECY, WHICH SHALL REMAIN IN FORCE AT ALL TIMES.

I, _____, hereby submit the following information as requested in addition to the initial submitted Client Information Sheet. I understand that this information will be relied upon, unconditionally, as statements by me of material fact and is a continuation and addition to the Client Information Sheet provided.

**PLEASE ANSWER QUESTIONS FULLY AND ACCURATELY
IF INFORMATION IS DIFFERENT THAN AS SET FORTH BELOW, CORRECT AS
REQUIRED**



1	Please describe, in detail, your primary business activity?
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	See attached <input type="checkbox"/>
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2	What is the amount of funds, assets, or proceeds you are planning to place in the Paymaster & Fiduciary Trust Accounts and please describe in detail the nature of those?
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	See attached <input type="checkbox"/>
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3	Please provide the full name of the depository bank, and the city and country where the bank and funds are located.
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		See attached <input type="checkbox"/>
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4	Are you the sole account signatory on the bank account? Where a multiple-signature accounts, please list the names and titles of ALL account signatories, and the dates each was placed on the account.
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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5	Are the funds coming from a third party? If yes, please give detailed information and documentation of the party and why funds are allocated to you.
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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6	Are you willing to permit the Paymaster to confirm and validate the availability of your funds, assets, or proceeds (and the “good-standing” status of your account) on a bank-to-bank basis?
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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7	Do you have full and complete legal ownership of the funds, assets, or proceeds - i.e. Are you the genuine and true funds owner who has EARNED the funds himself through his own legitimate business activities or INHERITED the funds as legal beneficiary? If "no", please explain your relationship to the cash funds.
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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8	How long have the funds or assets been on deposit in the account?
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	See attached <input type="checkbox"/>
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<div></div>



9	Please describe, IN DETAIL, how you earned the funds, proceeds, or how you acquired the assets. Alternatively, if the funds or assets represent inherited funds, please state FULL details of the inheritance history:
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		See attached <input type="checkbox"/>
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10	Are the funds or assets under your complete control, free of any restrictions, third-party interests, or encumbrances, free of independent third-party management, and immediately available and FREELY TRANSFERABLE upon your sole instructions?
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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11	Are the funds or assets leased or borrowed, or have the funds or assets been assigned or pledged to you by the real owners of the funds? If "yes", please describe fully and provide the owners information.
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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12	Are the funds or assets "PRE-BLOCKED" by the bank, or is your ability to use the funds /assets restricted in any way? If "yes", please describe fully.
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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13	Do the funds or assets represent pooled, aggregated, syndicated, or invested funds belonging, in whole, or in part, to other third-party owners? If "yes", please describe fully.
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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14	Are there any other persons and/or entities that have an ownership or financial interest in your funds, assets, or proceeds? If "yes", please describe fully.
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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17	Have the funds, assets, or proceeds been acquired or will be utilized for transactions violating international laws of money laundering, financing terrorist organizations, or in violation of restrictions sending funds to certain countries or persons even if it is through a third party? If "yes", please describe fully.
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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18	Will the funds or proceeds be utilized for transactions violating international laws of money laundering, financing terrorist organizations, or in violation of restrictions sending funds to certain countries or persons even if it is through a third party?
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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19	Do you speak and read English? If not, what language(s) do you speak and read?
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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20	Are you personally available – in a sit-down meeting, if necessary - to clarify further questions, details, or assist in the transaction?
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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21	Is there any negative disclosure that would be proper to assure full disclosure before proceeding with accepting these funds in the Fiduciary / Paymaster Trust accounts?
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No <input type="checkbox"/>	Yes <input type="checkbox"/>	See attached <input type="checkbox"/>
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Are you being nominated as a trustee or nominee by a current or previous political office holder or government employee, corporation, person, or any third party regarding the funds, assets, or proceeds?	No <input type="checkbox"/>	Yes <input type="checkbox"/>
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Are you affiliated or involved with any corporation or individual person that has been convicted of any crimes, fraud, money laundering, terrorist financing, or illegal activities that are covered by the laws described on the first page.	No <input type="checkbox"/>	Yes <input type="checkbox"/>
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In case any of the above questions is answered “YES”, separate written explanations and documentations are required!

- **In case you not adequate space is provided in the form, please attach (include) a separate page with the additional information.**



I HEREBY DECLARE, WARRANT AND AFFIRM UNDER PENALTY OF PERJURY THAT THE INFORMATION SET FORTH ABOVE IS TRUE AND ACCURATE.

CLIENT SIGNATURE
**We kindly require an original
signature in wet blue ink!**

NAME OF CLIENT / PRINCIPAL

NAME OF CLIENT / PRINCIPAL
SIGNING

TITLE OF SIGNER

NOTARY PUBLIC

ON THIS DATE BEFORE ME, THE UNDERSIGNED PERSONALLY APPEARED BEFORE ME AND KNOWN TO BE THE INDIVIDUAL DESCRIBED HEREIN WHO EXECUTED THE FOREGOING DOCUMENT, ACKNOWLEDGING THAT THEY PROVIDED TRUTHFUL AND ACCURATE INFORMATION UNDER OATH AND EXECUTED THE SAME AS THEIR FREE ACT AND DEED.

MY COMMISSION EXPIRE S:

NOTARY PUBLIC SIGNATURE

ALETAR INTERNAL INFORMATION (DO NOT COMPLETE THIS SECTION)

Paymaster Code :
CLIENT CODE :

