

INDIVIDUAL KYC INFORMATION FORM

Individual Client Due Diligence Profile

Please complete all applicable fields. This form supports Know Your Customer (KYC), identity, source-of-funds, transaction, sanctions and compliance review for prospective attorney paymaster engagements.

IMPORTANT

Submission does not constitute acceptance of a transaction or create an attorney-client relationship unless separately agreed in writing.

1. PERSONAL INFORMATION

Full Legal Name

Date of Birth

Nationality / Citizenship

Country of Residence

Primary Telephone

Email Address

Occupation / Profession

Employer / Business Name

Residential Address

Mailing Address (if different)

Tax Identification / Social Security / National Tax Number

IDENTIFICATION & PERSONAL PROFILE

2. GOVERNMENT-ISSUED IDENTIFICATION

Identification Type

☐ Passport ☐ Driver's License ☐ National ID Card ☐ Other

Identification Number

Issuing Country / Authority

Issue Date

Expiration Date

3. EMPLOYMENT / BUSINESS INFORMATION

Current Occupation / Position

Employer / Company / Business

Business Address

Nature of Business / Professional Activity

Approximate Years in Current Business / Profession

4. CONTACT / AUTHORIZED REPRESENTATIVE (IF APPLICABLE)

Representative / Advisor Name

Company / Firm

BANKING & TRANSACTION INFORMATION

5. BANKING INFORMATION

Bank Name

Account Name

Account Number / IBAN

SWIFT / BIC

ABA / Routing Number (if applicable)

Relationship Manager / Banker

Banker's Telephone

Banker's Email

Bank Address

6. PROPOSED PAYMASTER TRANSACTION

Transaction Reference / Name

Anticipated Transaction Amount

Currency

Expected Date of Funds

Country From Which Funds Will Originate

Originating Bank

Name of Originating Account Holder

Relationship to Applicant

Nature and Business Purpose of Transaction

SOURCE OF FUNDS & EXPECTED DISTRIBUTIONS

7. SOURCE OF FUNDS / SOURCE OF WEALTH

Primary Source of Transaction Funds

- ☐ Salary / Employment ☐ Business Income ☐ Sale of Asset ☐ Investment Proceeds
- ☐ Loan Proceeds ☐ Real Estate Transaction ☐ Inheritance / Estate ☐ Digital Asset
- ☐ Historical / Collectible Asset ☐ Other

Describe the Source of Funds

General Source of Wealth

Supporting Documentation Available

- ☐ Bank Statements ☐ Tax Returns ☐ Purchase / Sale Agreement ☐ Loan Agreement
- ☐ Financial / Investment Statements ☐ Asset Ownership Documentation ☐ Other

8. EXPECTED DISTRIBUTIONS / BENEFICIARY INFORMATION

Are you the principal beneficiary of the transaction? Approximate Number of Additional Beneficiaries

- ☐ Yes ☐ No

Brief Description of Proposed Distribution Structure

COMPLIANCE INFORMATION

9. COMPLIANCE & BACKGROUND INFORMATION

Are you a Politically Exposed Person (PEP), or an immediate family member or close associate of a PEP? ☐ Yes ☐ No

Are you currently subject to any economic or financial sanctions or restrictions? ☐ Yes ☐ No

Have you been subject to a material regulatory, financial-crime, fraud, money-laundering, or sanctions-related investigation or enforcement action? ☐ Yes ☐ No

Have you been convicted of, or are you currently charged with, a financial crime, fraud, money laundering, or similar offense? ☐ Yes ☐ No

Are transaction funds expected to originate from or pass through a jurisdiction subject to applicable sanctions or material banking restrictions? ☐ Yes ☐ No

Will any material portion of the transaction funds be provided by a third party not otherwise identified in the transaction documentation? ☐ Yes ☐ No

If Yes to any question above, please provide complete details

10. DOCUMENT CHECKLIST

☐ Government-Issued Photo Identification

☐ Proof of Residential Address

☐ Bank Account Verification / Bank Statement

☐ Tax Identification Documentation, if applicable

☐ Underlying Transaction Agreement / Contract

☐ Source-of-Funds Documentation

☐ Source-of-Wealth Supporting Documentation, if requested

☐ Beneficiary / Distribution Information

☐ Other Supporting Documentation Requested by the Firm

CERTIFICATION & INTERNAL REVIEW

11. CERTIFICATION AND AUTHORIZATION

I certify that the information provided in this form and accompanying documentation is true, accurate, current, and complete to the best of my knowledge. I authorize the Law Offices of Bruce Markowitz to request additional information and to verify information supplied in connection with its due-diligence review. I understand that submission or review of this form does not obligate the Law Offices of Bruce Markowitz to accept me or any proposed transaction as a client or paymaster engagement. I agree to promptly notify the firm of any material change to the information provided.

Full Legal Name

Date

Signature / Typed Name

FOR LAW OFFICES OF BRUCE MARKOWITZ - INTERNAL USE ONLY

Date Received

Transaction Reference

KYC Review

☐ Pending ☐ Additional Information Required ☐ Completed

Review Items

☐ Identity / Address Verification ☐ Sanctions / PEP Screening ☐ Source of Funds

☐ Source of Wealth ☐ Transaction Documentation ☐ Banking Information

Engagement Status

☐ Under Review ☐ Approved Subject to Engagement Documentation

☐ Additional Due Diligence Required ☐ Declined

Reviewed By

Review Date