

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

INVESTOR TRANSACTION CODE: (investor to assign)

DOCUMENTATION ENCLOSED (E)

***** CORPORATE ENTRY *****

DATE: April 18, 2023
TO: Trade Authority / Program Manager
RE: Participation in Structured Private Financial Opportunity

- UNDERSTANDING RULES OF THE ROAD
- AFFIDAVIT REQUESTING INFORMATION
- CLIENT INFORMATION SHEET
- CORPORATE RESOLUTION
- CLIENT LETTER OF INTENT
- LETTER OF CEASE & DESIST CONFIRMATION
- SOURCE OF FUNDS AFFIDAVIT
- LETTER OF NON-SOLICITATION & REQUEST
- AUTHORIZATION TO VERIFY FUNDS
- CONFIRMATION OF BANK OFFICER
- PASSPORT COPIES OF SIGNATORY & OFFICERS
- PROOF OF FUNDS: **NO OLDER THAN 3 DAYS**
- BANK OFFICERS BUSINESS CARDS
- BANK CONFIRMATION LETTER
- PROOF OF LIFE + SIGNATORY'S UTILITY BILL
- CORPORATE REGISTRATION, LETTER OF GOOD STANDING
- LETTER OF LIASON AUTHORITY RE TRANSLATOR

PLEASE NOTE THE FOLLOWING INSTRUCTIONS:

- **ENTER A CLIENT'S 'TRANSACTION CODE' WHERE REQUESTED.**
- **ONLY BLUE 'WET INK' SIGNATURES/INITIALS ARE ACCEPTED – NOT 'CUT & PASTE' (ELECTRONIC) SIGNATURES OF INVESTOR.**
- **PLEASE PROVIDE (150 DPI) 'PDF' SCANS/FILES NOT JPG.**
- **DON'T DELETE ANY TEXT -- IF NOT APPLICABLE, ENTER 'N/A'**
- **BANK STATEMENTS, PASSPORTS, UTILITY BILLS MUST BE TRUE COPIES OF THE ORIGINAL**

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 the proper signatories.

NOTE: The original signed documents may be requested -- so keep them on file.

APPLICANT INITIALS _____

PAGE 25 OF 27

UNDERSTANDING THE RULES OF THE ROAD

None of the customary standards and practices that apply to normal, conventional business, investing and finance applies to private funding programs. It is a "privilege" to be invited to participate in a Private Placement Transaction Program, not a "right." The trading administrators and managers have a virtually endless supply of financially qualified applicants. All things considered, the trading administrators and their banks will favor the applicant who provides the best paperwork. An applicant should never underestimate what the trading entities know about him. Failure to provide full disclosure will disqualify the disingenuous. Clients must first prove that they are qualified, not the other way around. Until the client is accepted by Compliance, the Traders, and Trading Banks, no placement can occur. The U.S. Patriot Act has introduced obligatory compliance procedures. Face-to-face interviews with compliance officers and program management are occasionally required, but generally not necessary. Any arrogant or demanding personality will be guaranteed to be rejected. Only the principal owner of funds is accepted as signatory. Corporations must empower an Officer or Director as sole, exclusive signatory by using a Corporate Resolution. Not only do the funds have to be on deposit in an acceptable bank; they must also be in an acceptable jurisdiction. **It is felony fraud to submit documents or financial instruments that are forged, altered or counterfeit. Such documents are promptly referred to the appropriate law enforcement agencies for immediate criminal prosecution.** The practices, procedures and rules are determined by the U.S. Federal Regulatory Authorities, Western European Central Banks program management, licensed traders and trading banks. It is their decision whom to accept and whom to reject. Contract terms, yield, schedules, etc., are made to fit their needs and schedules – and not the caprices or demands of the investors. This marketplace is highly regulated and strictly confidential, and absolute confidentiality by the investor is a key element of every contract. A client who breaks confidentiality will precipitate instant cancellation. Finally, submission of the application documents to more than one management group at a time is termed "shopping". If an investor "shops" he can expect that this fact shall be quickly disseminated and known among the program management groups who maintain close communication – and will then be accepted by none and rejected by all.

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

Signature: _____ (Blue 'Wet Ink' Signature)

Name:

Passport Number:

Country of Issuance:

AFFIDAVIT REQUESTING INFORMATION

DATE: **April 18, 2023**

TO: Trade Authority / Program Manager

RE: Participation in Structured Private Financial Opportunity

INVESTOR'S TRANSACTION CODE: **(client to assign)**

Dear Sir,

I, **(NAME)**, the undersigned, on my own behalf, 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 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 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 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, 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,

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

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, 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 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 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: **April 18, 2023**

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

Signature: _____ (Blue 'Wet Ink' Signature)

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

[[[[[SEAL OF COMPANY]

CLIENT INFORMATION SHEET

Directions: This document must be fully completed -- if a line item does not apply to you, then insert the term: "N/A" (not-applicable) -- DO NOT DELETE ANY TEXT

Corporate Information

Full Name of Corporation: (Provide Certificate of Registration)

Date of Incorporation:

Incorporated in (City/State/Country):

Registration Number:

Board of Directors (Name & Title):

Officers (Name & Title):

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

Registered Address of Corporation

Full Name of Corporation:

Street Address:

City:

State:

Country:

Postal Code:

Mailing Address of Corporation

Full Name of Corporation:

Street Address:

City:

State:

Country:

Postal Code:

Corporate Signatory's Contact Information

Signatory Full Name:

Telephone Number:

Fax Number:

Mobile Number:

Email Address:

Skype Name:

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

Financial Information (Corporation) *(Attach 'Certificate of Good Standing' for company)

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

Languages / Translator

Does Signatory speak English?:
Languages Spoken by Signatory?:
If Not English - Name of Translator (Complete Page 24):
Mobile Number:
Land line Number:
Email Address:

Legal Advisor

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

Corporate Bank Information *(Please attach (Pg.21) current dated 'Bank Account Statement')

Bank Name & Branch (where funds are currently on deposit):
Street Address:
City:
State:
Country:
Postal Code:

Account Name:
Account Number:
IBAN:

APPLICANT INITIALS _____

PAGE 25 OF 27

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

Sort Code ABA No.:
SWIFT Code:
Account Signatory (1):
Account Signatory (2):
Bank Officer #1 Name, PIN:
Bank Officer #2 Name, PIN:
Telephone Number:
Fax Number:

Client Account where Profits to be paid

Bank Name & Branch: (TBA)
Street Address:
City:
State:
Country:
Postal Code:

Account Name:
Account Number:
IBAN:
Account Signatory:
Sort Code ABA No.:
SWIFT Code:

Bank Officer Name:
Telephone Number:
Fax Number:

Personal & Passport Information of Officers of the Corporation

**(Please attach copy of Corporate Resolutions adopted by the Board of Directors appointing and authorizing said officer to represent and legally bind the corporation)*

** Duplicate the following section for EACH Director.*

First Name:
Middle Name:
Last Name:
Gender:
Date of Birth:

APPLICANT INITIALS _____

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

Social Security Number:

Country of Citizenship:

Languages Spoken:

Passport Information of each Officer of the Corporation: *(Please attach a scan of the photo and signature pages of each Officer's Passport starting on Page 20)

Passport Number:

Date of Issue:

Date of Expiry:

Issuing Authority:

Home Address-Legal Residence (of each Officer of Corporation)

*(Please attach true copies of the originals of 2 Home/Corporate Utility Bills)

Full Name of Officer:

Street Address (Home):

City:

State:

Country:

Postal Code:

*(Duplicate the above section for each Director)

Investment

Amount of Funds/Assets available for this transaction? :

What is the Currency? (Euro, USD, GBP)? :

Origin of Funds/Assets (How funds earned or acquired – Please give Details)? :

Are these Funds/Assets free & clear of all liens, encumbrances and third party interests? :

APPLICANT INITIALS _____

PAGE 25 OF 27

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

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

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

Signature: _____ **(Blue 'Wet Ink' Signatures)**

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

[SEAL OF COMPANY]

APPLICANT INITIALS _____

PAGE 25 OF 27

CORPORATE RESOLUTION

INVESTOR'S TRANSACTION CODE: (client to assign)

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 authorize: (**NAME**) holder of Passport Number (**NUMBER**) issued on (**DATE**) as our Managing Member and (**TITLE: President, CEO etc.**) who has 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 aforesaid financial investment.

RESOLUTION 3:

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

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

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 (sole signatory) 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: **April 18, 2023**

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

Signature: _____

[SEAL OF COMPANY]

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

Signature: _____

(Blue 'Wet Ink' Signatures)

Name / Title: **SECRETARY**

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

LETTER OF INTENT

APPLICANT INITIALS _____

PAGE 25 OF 27

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

DATE: April 18, 2023

TO: Trade Authority / Program Manager

RE: Participation in Structured Private Financial Opportunity

INVESTOR'S TRANSACTION CODE: (client to assign)

Dear Sir,

I, (NAME), the undersigned, 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/asset of (SPELL AMOUNT) Euro/United States Dollars (\$____,000,000.00 USD/Euro/GBP) 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/assets were legally obtained from non-criminal business or actions. I further confirm I am the beneficial owner of these cash funds/assets and that I have full signatory authority and control thereof, and that such funds/assets 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.

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. **The originals may be requested.**

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

APPLICANT INITIALS _____

PAGE 25 OF 27

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

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

Signature: _____ (Blue 'Wet Ink' Signatures)

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

[SEAL OF COMPANY]

APPLICANT INITIALS _____

PAGE 25 OF 27

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

LETTER OF CEASE & DESIST CONFIRMATION

DATE: **April 18, 2023**

TO: Trade Authority / Program Manager

RE: Participation in Structured Private Financial Opportunity

INVESTOR'S TRANSACTION CODE: **(client to assign)**

Dear Sir,

I, **(NAME)**, bearing **(COUNTRY)** Passport No. **(NUMBER)**, duly authorized and legal representative director for and on behalf of **(NAME OF COMPANY)**, give notice that I have issued Cease & Desist notices to any other group approached in the past regarding my/our 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 of my/our documents as from **April 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 & 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: **April 18, 2023**

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

Signature: _____

[SEAL OF COMPANY]

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

APPLICANT INITIALS _____

PAGE 25 OF 27

SOURCE OF FUNDS AFFIDAVIT

DATE: April 18, 2023

TO: Trade Authority / Program Manager

RE: Participation in Structured Private Financial Opportunity

INVESTOR'S TRANSACTION CODE: (client to assign)

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 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) Euro/United States Dollars (\$____,000,000.00 USD/Euro/GBP) and it is deposited in Account No (ACCOUNT NUMBER) at (NAME OF THE BANK), located at (ADDRESS OF BANK).

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.

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: April 18, 2023

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

For and on behalf of (NAME OF COMPANY)

Signature: _____

[SEAL OF COMPANY]

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

APPLICANT INITIALS _____

PAGE 25 OF 27

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

LETTER OF NON-SOLICITATION & REQUEST

DATE: April 18, 2023

TO: Trade Authority / Program Manager

RE: Participation in Structured Private Financial Opportunity

INVESTOR'S TRANSACTION CODE: (client to assign)

Dear Sir,

I, (NAME), the undersigned, hereby confirm that I have requested of you and your organization specific confidential information and documentation on behalf of ourselves. I hereby declare that I am fully aware of the information received from you is in direct response to my request, and is not in any way considered or intended to be a solicitation of funds of any sort, or any type of offering, and is intended for our general knowledge only. I hereby affirm under penalty of perjury that you have not solicited in any way. I understand that the contemplated transaction is strictly one of private placement, and is in no way relying on or related to the United States Securities Act of 1933, as amended or related regulations, and does not involve the sale of securities. That affiant makes this affidavit knowing that the recipients will rely on the contents hereof, and agrees to indemnify and hold-harmless all recipients and all other parties -- including intermediaries -- against any and all claims resulting from any applicant misrepresentation of a material fact or any loss of asset value or any act (legal or not) of a bank or other financial institution, governing authority or agency, the Federal Reserve or an official or other insider of any such entity. Further, I hereby declare we are not licensed brokers or government employees, and understand that neither are you or your organization. We mutually agree that this private placement transaction is exempt from the Securities Act, and not intended for the general public, and all materials are for private use only.

For and on behalf of (NAME OF COMPANY)

Signature: _____ (Blue 'Wet Ink' Signatures)

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

[SEAL OF COMPANY]

AUTHORIZATION TO VERIFY FUNDS

DATE: **April 18, 2023**

TO: Trade Authority / Program Manager

RE: Authorization to Verify

INVESTOR'S TRANSACTION CODE: **(client to assign)**

Know all men, by these present that I, **(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)** Euro/United States Dollars **(\$_____,000,000.00 USD/Euro/GBP)** 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:

Cash Amount: **(\$_____,000,000.00 USD/Euro/GBP)**

Bank Name & Branch: **(NAME OF BANK & BRANCH)**

Bank Address: **(ADDRESS OF BANK)**

Account Name: **(ACCOUNT NAME)**

Account Number: **(ACCOUNT NUMBER)**

IBAN: **(INTERNATIONAL BANK ACCOUNT NUMBER)**

Account Signatory: **(ACCOUNT SIGNATORY)**

Bank Officer on the Account: **(NAME & TITLE)**

Bank Officer's Bank E-mail: **(NAME@BANK DOMAIN – NOT PERSONAL)**

(A COPY OF THIS AUTHORIZATION WILL BE PRESENTED AND LODGED WITH 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: **April 18, 2023**

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

Signature: _____

[SEAL OF COMPANY]

Name / Title:

Company:

Passport Number:

C.C.: (NAME OF BANK & BANK OFFICER)

CONFIRMATION OF BANK OFFICER

DATE: April 18, 2023

TO: Trade Authority / Program Manager

RE: Participation in Structured Private Financial Opportunity

INVESTOR'S TRANSACTION CODE: (client to assign)

Dear Sir,

I, (NAME), bearing (COUNTRY) Passport No. (NUMBER), the duly authorized and legal 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 BANK) located at (MAILING ADDRESS) who will be available to cooperate with the trader for blocking of the following referenced bank account:

Signatory's Bank Account Number:

Bank Officer Name & Title:

Bank Officer Bank Telephone No.:

Bank Officer Bank E-mail Address:

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:
April 18, 2023

For and on behalf of (NAME OF COMPANY)

Signature: _____

[SEAL OF COMPANY]

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

PASSPORT INSTRUCTIONS

PROVIDE A HIGH QUALITY 'PDF' COLOR SCAN, ENLARGED TO 140% - SO THE PHOTO AND SIGNATURE PAGES FILL AN 8½ X 11 INCH PAGE SIZE IN THE PORTRAIT FORMAT.

THE PHOTO AND SMALL TYPE MUST BE CLEAR AND EASY TO READ

DELETE ALL TEXT ON THIS PAGE AND PASTE PASSPORT HERE

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

PROOF OF FUNDS & INSTRUMENT INSTRUCTIONS

ONLY A CURRENT DATED (UNSANITIZED) 'BANK STATEMENT' OR 'SCREEN PRINT OUT' SIGNED BY TWO BANK OFFICERS (**NO OLDER THAN THREE (3) DAYS**) IS ACCEPTED AS A 'PROOF OF FUNDS' -
- ALONG WITH A SCAN OF **BUSINESS CARDS** OF THE TWO (2) SIGNING BANK OFFICERS.

PLEASE SCAN IN 'PDF' AND PASTE HERE – AFTER DELETING ALL TEXT ON THIS PAGE.

IF SUBMITTING A 'FINANCIAL INSTRUMENT' PLEASE ATTACH A HIGH-QUALITY 'PDF' COLOR SCAN OF THE 'ORIGINAL' DOCUMENT -- FRONT & BACK.

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

BANK OFFICERS' BUSINESS CARDS

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

BANK CONFIRMATION LETTER

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

PROOF OF LIFE

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

SIGNATORY'S UTILITY BILL

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

CORPORATE REGISTRATION & CURRENT LETTER OF GOODSTANDING

[INSERT APPLICANT LETTERHEAD IN THIS HEADER SPACE]

LETTER OF LIAISON & COMMUNICATIONS AUTHORITY

DATE: April 18, 2023

TO: Trade Authority / Program Manager

RE: Participation in Structured Private Financial Opportunity

INVESTOR'S TRANSACTION CODE: (client to assign)

Dear Sir,

I, (NAME), bearing (COUNTRY) Passport No. (NUMBER), duly authorized and full legal representative director for and on behalf of (NAME OF COMPANY), hereby authorize (TRANSLATOR NAME), bearing (COUNTRY) Passport No. (NUMBER) having the below contact details, to act as my official liaison to carry out the duty and responsibility as primary contact to coordinate communication and receive copies of all written and telephonic communication regarding the above transaction, as I don't speak English and he is my official translator.

Please provide copy of the Translator's Passport.

Name of Translator: (TRANSLATOR NAME)

Translator's Country/Passport No.: (TRANSLATOR COUNTRY/PASSPORT NO.)

Phone Land Line Number: (TRANSLATOR TELEPHONE NUMBER)

Mobile Number: (TRANSLATOR MOBILE NUMBER)

Email Address: (TRANSLATOR E-MAIL)

Address: (TRANSLATOR ADDRESS)

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

For and on behalf of (NAME OF COMPANY)

Signature: _____ (Blue 'Wet Ink' Signatures)

Name / Title:

Company:

Passport Number:

Date of Issue:

Date of Expiry:

Country of Issuance:

[SEAL OF COMPANY]

APPLICANT INITIALS _____

PAGE 25 OF 27