

## Establishing the Identity of the Beneficial Owner

Last name(s), first name(s), Company (Contracting Partner)

Client no. (CIF) or account/safekeeping account number(s)

### Beneficial Owner

The term “**beneficial owner**” refers to the person to whom the deposited assets can be economically ascribed. The beneficial owner does not necessarily have to have bank power of attorney/signing authority for the business relationship.

**The Contracting Partner hereby declares,** (check only one box!)

- that he/she is the **sole** beneficial owner of the assets;
- that the following is/are the beneficial owner(s) of the assets:

<b>1</b>	Last name(s)/Company	Nationality(ies) (provide all nationalities)
	First name(s)	Date of birth
	Actual residential address / Registered office address	Domiciliary state (no abbreviations)
<b>2</b>	Last name(s)/Company	Nationality(ies) (provide all nationalities)
	First name(s)	Date of birth
	Actual residential address / Registered office address	Domiciliary state (no abbreviations)
<b>3</b>	Last name(s)/Company	Nationality(ies) (provide all nationalities)
	First name(s)	Date of birth
	Actual residential address / Registered office address	Domiciliary state (no abbreviations)

- |  |   |
|--|---|
| <input type="checkbox"/> First submission of form                  | <input type="checkbox"/> Replacement of all previous “Form A” |
| <input type="checkbox"/> Addendum to one or more existing “Form A” | <input type="checkbox"/> _____                                |

**The Contracting Partner hereby undertakes to automatically inform Credit Suisse AG of any changes to the information contained herein.**

Date

Signature(s) of the Contracting Partner

\_\_\_\_\_ 

It is a criminal offence to deliberately provide false information on this form (document forgery under Art. 251 of the Swiss Penal Code).

<b>To be completed by the Bank</b>	Re. BO 1: _____	Re. BO 2: _____	Re. BO 3: _____
<b>01002</b>	Client no. (CIF)	Signature and stamp of Relationship Manager	

# How to Complete Form A

No changes or corrections may be made on form A.

A copy of a valid identification document (e.g., passport or ID card) must be enclosed with Form A for all beneficial owners listed below.

**Form A** pursuant to Art. 27 et seq. CDB 16

A

## Establishing the Identity of the Beneficial Owner

Last name(s), first name(s), Company (Contracting Partner)

Client no. (CIF) or account/safekeeping account number(s)

**Beneficial Owner**

The term **"beneficial owner"** refers to the person to whom the deposited assets can be economically ascribed. The beneficial owner does not necessarily have to have bank power of attorney/signing authority for the business relationship.

**The Contracting Partner hereby declares,** (check only one box!)

that he/she is the **sole** beneficial owner of the assets;

that the following is/are the beneficial owner(s) of the assets:

**1** Last name(s)/Company: Specimen Nationality(ies) (provide all nationalities): Switzerland

First name(s): Peter Date of birth: 13.12.1960

Effective residential address / Registered office address: Example Street 22, 9999 Example Domiciliary state (no abbreviations): Switzerland

**2** Last name(s)/Company: Josef Exemple Ltd. Nationality(ies) (provide all nationalities): Switzerland

First name(s): \_\_\_\_\_ Date of birth: \_\_\_\_\_

Effective residential address / Registered office address: Specimen Street 22, 9999 Example Domiciliary state (no abbreviations): Switzerland

**3** Last name(s)/Company: \_\_\_\_\_ Nationality(ies) (provide all nationalities): \_\_\_\_\_

First name(s): \_\_\_\_\_ Date of birth: \_\_\_\_\_

Effective residential address / Registered office address: \_\_\_\_\_ Domiciliary state (no abbreviations): \_\_\_\_\_

First submission of form  Replacement of all previous "Form A"

Addendum to one or more existing "Form A"  \_\_\_\_\_

**The Contracting Partner undertakes to automatically inform Credit Suisse AG of any changes.**

Date

Signature(s) of the Contracting Partner

**16.11.2015**

Intentionally providing false information on this form is a punishable act (document forgery under Art. 251 of the Swiss Penal Code).

**To be completed by the Bank**

**01002**

Client no. (CIF)

Re. BO 1: \_\_\_\_\_

Re. BO 2: \_\_\_\_\_

Signature and stamp of Relationship Manager

Re. BO 3: \_\_\_\_\_

118 473 11.15

110 323 11.15

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If the form A applies to the entire relationship, the client number (CIF no.) must be entered here. But if the form A applies only to certain accounts/safekeeping accounts, the relevant account/safekeeping account numbers must be entered here.

If you check the upper box, it means: **the assets belong exclusively to you alone.**

The assets belong to you as well as to third parties, or only to third parties. In other words, you must check the lower box if the money belongs to you plus one or more third parties or companies/legal entities, or only to one or more third parties or companies/legal entities. In this case, it is essential that we have the details of all the people, companies or legal entities to which the money belongs. So we need your details too (if applicable).

Example for a natural person.

Example for a legal entity.

Please check a box to indicate whether you are completing this form for the first time, whether it is an addendum to an existing form, or whether this form replaces all previous forms.

Don't forget the date.

The signature of the Contracting Party