

How did you hear about us? _____

Who referred you? _____

BUSINESS CLIENT PROFILE

This document is a confidential and internal document held by Global Currency Services Inc. The purpose of the document is to fulfill the regulations outlined by FINTRAC in accordance with The Proceeds of Crime and Terrorist Financing Act.

BUSINESS INFORMATION (Attach first page of letters of Incorporation or Business Registration)

Business Name _____

Main Contact _____

Mailing Address _____

City _____ Postal Code _____

Phone: _____ Alternate Phone: _____

Fax: _____ Email _____

Web Address: _____

MAJOR SHAREHOLDERS (More than 25%) (Attach a copy of an ID)

Name _____ Name _____

Address _____ Address _____

Position _____ Position _____

Name _____ Name _____

Address _____ Address _____

Position _____ Position _____

CORPORATE DIRECTORS (Attach a copy of an ID)

Name _____ Name _____

Address _____ Address _____

Identification Number _____ Identification Number _____

Name _____ Name _____

Address _____ Address _____

Identification Number _____ Identification Number _____

Briefly describe the nature of your business: _____

BUSINESS CLIENT PROFILE Continued...

Transactions carried out will be for the purpose of: _____

APPROVED STAFF TO CONDUCT TRANSACTIONS

Name _____ Title _____

Phone _____ Signature _____

ID _____ IDX _____ DOB _____

Name _____ Title _____

Phone _____ Signature _____

ID _____ IDX _____ DOB _____

Name _____ Title _____

Phone _____ Signature _____

ID _____ IDX _____ DOB _____

BANKING INFORMATION

Financial Institution _____

Address _____

Transit Number _____

Account Number _____ Currency _____

Account Number _____ Currency _____

BY SUBMITTING THIS APPLICATION, you authorize Global Currency Services Inc. and it's agents or assigns to exchange your personal or business information on an ongoing basis with credit bureaus and permit such organizations to verify your personal or business information in order to protect you, ensure your completeness of the information and maintain the integrity of the credit granting system, and so co-operate with local, provincial and national authorities in the investigation of unlawful or improper activities in order to protect you and us from fraudulent transactions.

Identification taken by _____ Date _____ Signature _____

Corporate Identity Confirmed by _____ Date _____ Signature _____

How was this information confirmed? _____

PLEASE RETURN completed forms by **fax to 519-763-6179** or by email to **service@global-currency.com**