## Finalis Securities - Customer Identification Form, Individual (CIF)

This form is for customers who are investing as "natural persons" - Individually or Jointly.

You are considered to be a "Customer" of Finalis if you are a party (Seller or Buyer) to a securities transaction managed by a registered representative of our firm.

Federal law requires us to collect the information requested below in order to identify all parties, verify the identifications, and review suitability for participation in the transaction.

To read more about the Finalis Privacy Policy here: <a href="https://www.finalis.com/platform-disclaimers/#privacy">https://www.finalis.com/platform-disclaimers/#privacy</a>

,	<u>disclaimers/#privacy</u>	
* R	Required	
1.	Email Address *	
2.	Full Name *  Must match name shown on form of ID you upload belo	w
3.	Date of Birth *	
	Example: January 7, 2019	
4.	Home Address: Street *	
5.	Home Address: State *	
6	Home Address: 7in Code *	

7.	Mailing Address: If Different From Above	
8.	Home Phone: *	
9.	Type of government-issued identification (ID) that you will be uploading below for verification:	*
	Mark only one oval.	
	Driver's License	
	Passport	
	Other:	
10.	ID Expiration Date *	
	Example: January 7, 2019	
11.	Upload a photo of your ID *	
	Files submitted:	
	Customer Profile	

17.

12.	Employment Status: *
13.	Occupation *
14.	Name of Employer *
15.	Gross Income for the Most Recently Completed Calendar Year: *
16.	Gross Income for the Prior Calendar Year: *
17.	Estimated Net Worth (NOT including primary residence): *

25.	Are you or an immediate family/household member employed by or associated with the securities industry (e.g. a sole proprietor, partner, officer, director, branch manager, registered representative or other associated person of a FINRA or MSRB member firm) or a financial services regulator?	*
26.	Are you or an immediate family/household member a control person or affiliate of a publicly traded company under SEC Rule 144 (e.g. executive officer, director, 10% shareholder, policy-making officer, member of the board of directors, etc.)?	*
27.	If Yes to the Above Question, Please Describe.  Signature and Attestations	
	Signature and Attestations	

28.	Who is completing and signing this form? *	
	Mark only one oval.	
	✓ I am the Customer	
	I am the representative for the Customer	
29.	Signature (Type your Name) *	
30.	Date *	
	Example: January 7, 2019	

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