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List of Directors/Working Committee Members & CEO

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Details of the Directors/Working Committee Members and CEO:

S. No.	Position	Full Name	Father's Name	Grand Father's Name	Spouse Name	Permanent & Present Address	Telephone Number, Mobile Number, & Email Address
1.	CEO	Sunilghus	phanadhar Bhusal	Bhusal	yashoda Gyawali	Lalmatiya -2 Dang	9851121657
2.	Director	Kilshna prosa Acharya	Him ld Acharga	Acherya		Tokha-7	9851036368
3.	Director	Gangadhar Kaffe Sharma	Uporpati catie	Cacurishow	4 yan kun	Tokha-11 K1m	9851134682
4.							
5.							
6.							1000
7.							
8.							



KYC FORM FOR INDIVIDUAL CUSTOMER

			4000		Date: 15	3/04/201
Acc	count Holder's Name: Ganzale	Shar Kaff	e sharma	PAN No.		10
Da	te of Birth: 03/05/2024	Citizenship / ID N	No. 39900	Issuing Of	fice & Date: Zcy	2 anderi 2
Ge	nder: Male	Passport No.:		The second second	fice & Date:	1
Na	tionality: Res. Non Res.	Marital Status:	Married	Occuption	Busines	3
Pho	one No.: 01- 4373558	Mobile No.: 9	85113468	2		
	nail:		0,7,0,00		PO Box:	
Pre	sent Address	//	Permanent Addres			
Wa	rd No.: Tokka-11, K	athmandu	Ward No.: To	kha-11, K	attinan	<i>⊋u</i>
Tol	rd No.: Tokka - 11 , Ko e: Samakhusi use No.: trict: Kathmarsu		Tole: Sa			_ 7
Ho	use No.:	7	House No.; District:	all 1		_
Dis	trict: Kodhmovou		150494001	nuncual	1	
	ase of Non Residence		Beneficial Owner	Yes]No	
	N ID (If applicable):		If Yes,			
	eign Address:	-	Beneficial Owner N	ame:		
	untry: City/State		Address: Relation:			
Vis	ntact No.:		Contact No.:			
	a Expiry Date:		Contact No.:			
	a unpir y trace.	A La Value Silver		I NY SKALA		
	ily Member:					
5N	Relation		Surname	Citizenship No.*	Issuing Office*	Date of issue*
1	Spouse	ayen kum	on Gyavali Pati Keyle			
3	Father Mother	Late Umay	Pati Keyle			
4	Grandfather		la Kafle			
5	Grandmother	vauri shar	ikar Kafle			
6	Son	Biraj K	elo.			
7	Daughter	Binita K	0-010-			
8	Daughter in Law (son's wife)*	15 MHa K	and in			
g	Father in Law (of married women)*					
	compulsory for low risk customers	TERRET STATE				
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SN	Name of Firm/Company/0		Address	Web Site	Post	Annual Incom
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3	April mae intern	anima 10	en-3, KIM	-	- '1	
4	2					
HP	P/PEP/NF2F: Yes No	If ye	es, remark on affiliatio	on:		
Ex	pected Yearly Turnover:		Less than 5 Lakhs	Less than	89-Lakhs	>50 Lakhs
Ex	pected Monthly Transaction:		Less than 15 Lakh	s Less than	25 Lakhs	>25 Lakhs
1	rpose of Account: Remittance	Savings	Business	Others	POSTATEMAS THES	termen a Denilla
	urce of fund Salary	Remittance Borrowings	☐ Investment ☐ Loan Repayment	Sale of Ass		
Pu				- Stricts (rife	as already.	
ű	nished or charged for any criminal act	tivities in the past	☐ Yes ☐ No			

3	Supporting Documents (provided by the	:ustomer)		Α.
I	Photo of account holder	Obtained	☐ Not obtained	
	Photo of beneficial owner	Obtained	☐ Not obtained	
1	Identification Document	Citizenship	Passport	Others
1	Address verifying document (Any one)	Utility Bill (Water/Electricity/ Telephone Bill)	Driving License	☐ Land ownership document
		Rental Agreement	letter from local authority	☐ Voter ID
E	Employee ID (Mandatory for Govt. Officials)	□ N/A	Yes	₽No
SI	ite Map Permanent Address	Present Address		
5	Camakhersi Jamakher Basandhar		House	orost olong Jate
1/	We hereby declare that all the information Right Left	a & documents provided to t	he bank are true & Correct,	
			and the second	
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APPENDIX: B
CITIZENS BANK INTERNATIONAL LIMITED KNOW YOUR CUSTOMER (KYC) FORM

KYC REQUIREMENT	DOCUMENTATION NEEDED
1. IDENTITY	
ı. Beneficial Owner	(For Individuals) on The of Domain
	Partnership / Sole Proprietorship / Ltd. Companies
	Names of Partners / Owners/ Directors / Major Share Holders
	CITIZENSHIP CERTIFICATE OR PASSPORT
). ID Documents	(Obtain Photocopy) AOA MUA, PAN TTRICEC
	PART (TIME) TO SEE
	INDIVIDUALS
. Legal Status	Documents as per policy to be obtained & kept with Account Opening Form
	SOLE PROPRIETORSHIP
	PARTNERSHIP*
	LTD, Cos. •
	OTHERS*
	* Copies of ID Documents for all Directors / Partners / Trustees etc. to be
	obtained.
. RESIDENCE /	
USINESS	
VFC ATION	The state of the s
. Residence Address/	Basbori-5 =+m / 9851134682
elephone	Basperi
. Occupation or Line of	
usiness	
. Business Address /	/
elephone	
. INCOME	OBTAIN SOURCE OF INCOME & APPROXIMATE FIGURES FOR INDIVIDUALS.
. IIVCOIVIC	FOR OTHERS IT SHOULD BE AVAILABLE FROM THEIR ACCOUNTS AND BALANCE SHEETS
. RELATIONSHIP	TOTAL STREETS OF AVAILABLE TROWN THEIR ACCOUNTS AND BALANCE SHEETS
Purpose	CA
. Commensurate Activity	
Funds for Opening	CASH NP2 AMOUNT 8
ccounts	AMOUNT Of
	Ni ni
 	DO YOU PRESENTLY MAINTAIN AN ACCOUNT WITH CBIL? YES / NO
EXISTING	IF YES - ACCOUNT NO:
ELATIONSHIP	BRANCH NAME
INTRODUCTION	NAME & A/CNO. Cal doon Graphica Nepal P.L 16BCA
. 8	ADDRESS CONTRACTOR (C. 1615C)
	ANY CORRESPONDENCE RETURNED
-	DURING LAST SIX MONTHS
	HOW LONG THE ACCOUNT HOLDER IS
	KNOWN TO THE INTRODUCER
	ACCOUNT STATUS
	DATE OF MEETING IF ANY &
	BRIEF COMMENTS
CLIENT REVIEW /	
EETING	Date of Meeting 1 1 M Mar. 2012
Initial	
	Brief Comments
28 10	
Subsequent	Date of Meeting
	Brief Comments
0	

SNATURE TERVIEWING OFFICER

MANAGER