WELCOME TO SOCIÉTÉ GÉNÉRALE INTERNATIONAL BRANCH



SOCIETE GENERALE ON YOUR SIDE

Sabiha BENOUARKA

The manager and her team are happy to welcome you at the Paris ACPI Branch.

AGENCE PARIS ACPI

29 BD HAUSSMANN 75009 PARIS

Tél: +33 1 53 30 87 10 Fax: +33 1 53 30 87 30 vie.particuliers@socgen.com

RER A: Auber

Metro: Auber (lines 3 - 7 - 8 - 9)

RER E: Haussmann

OPENING HOURS

Monday - Friday

9AM - 5:30PM





LIST OF DOCUMENTS TO PROVIDE US FOR AN **OPENING ACCOUNT**

In order to process your request, thank you for giving us the following elements :
→Only fully completed file will be managed within a delay of 8 days before the opening of the account.

IDENTITY CARD (a valid ID)		
If the client is a French, European or Swiss citizen: ☐ ID Card ☐ Passport		
If the client has an other nationality: □ Passport □ Resident permit or Resident card or French Resident Card (also EEUU) □ Resident permit request / Resident permit extension □ Asylum application receipt □ International protection request receipt		
PROOF OF ADRESS		
For an owner or a tenant: If the document is delivered by a supplier (Bill no older than 6 months or a valid « payment schedule »): □ Bill or annual payment schedule delivered by a power, gas or water supplier □ Bill delivered by the fixed-line Phone, Mobile and/or Internet supplier		
If the document is delivered by a lessor (document not older than 6 months): Notice of payment or rent receipt or rental contract (lease)		
If the document is delivered by tax authorities (current or past year): □ Last tax return □ Property tax or council tax		
For people staying: Accommodation certification completed and signed (attached model) and identity document and a proof of address less than 3 months old		
PROOF OF INCOME		
 Income declaration form (template attached) A valid student card Wage slip or employment contract or employer certification (no older than 6 months) Last tax return (current or past year) 		
AUTO-CERTIFICATION DE RÉSIDENCE FISCALE		
□ CRS form fully completed and signed		
If the client is non fiscal residence: □ Non fiscal residence certification (not older than one year) (These two proofs may be in French, English, Spanish, Italian, Portuguese or German, OTHERWISE they must be sent with their translation delivered by a sworn translator form www.annuaire-traducteur-assermente.fr If not: they can be translated by a local sworn translator) □ Valid V.I.E letter of engagement signed		

100% BENEFITS 100% ON YOUR SIDE

MY MONEY

Bank account

PRIVILEGE OFFER

GIFT ON OPENING
YOUR 1st SOCIETE GENERAL
BANK ACCOUNT (1)

MY WORKING LIFE

Young worker's loan

PRIVILEGE OFFER	
PROCESSING FEES WAIVED (4)	
VALID UNTIL 30/04/2019	

MY MONEY

Vital banking services



MY TRIP OVERSEAS

The international option



OFFER SUBJECT TO TERMS AND CONDITIONS. SEE OFFER DETAILS IN THE FOLLOWING INFORMATION SHEETS

NEXT STEPS

To finalise the opening of your account, you need to meet a relationship manager:

At the Business France Integration Day

or

By making an appointment at the International Branch



Afterwards , you will receive your contract with your IBAN and your access codes to log into your personal account online : particuliers.societegenerale.fr



Then, you will receive by post:

- A welcome letter
- The PIN number of your card
- Your access codes to complete your online identification



Your Card can be available at the branch or sent to an address of your choice.

Offer cannot be combined with any other Société Générale offers and is only applicable to adults participating in BUSINESS France V.I.E. and V.I.A. schemes. Offer valid until 30/04/2019 in all branches participating in this deal, subject to acceptance by the branch. Conditions applicable as of 01/05/2018. (1) Offer for new Société Générale customers only and valid when opening your first Société Générale bank account. Opening of account subject to the bank's approval. Account operation is subject to account management fees debited each quarter, according to current prices. People under 25 years old are exempt from these fees. To discover the other exemption conditions, see the brochure "Pricing conditions applied to banking transactions - Individuals" available in branches or on particuliers.societegenerale.fr. (2) Sobrio is a group of bank and non-bank services available from the age of 15. Applicable Sobrio price conditions depend on the type of card subscribed to, and additional services, indicated in the "price conditions for individuals' bank transactions" brochure available in branch or at particuliers.societegenerale.fr. (3) Offer valid for the first two years, only for VPAY, Visa, Visa Premier and MasterCard cards. (4) Processing fees outside promotional offer: 1% of loan amount with minimum fee of €50. (5) Payable option reserved for Jazz and Sobrio account holders 18 or over. Price of the option, excluding privilege offer, on 01/05/2018: Initial: €10/month – Intensive: €17.50/month – Unlimited: €25/month. 50% off for under 25 year olds and 20% off for 25-29 year olds, excluding Student Level: Intensive at €5/month, reserved for students under 30 years old upon presentation of proof of student status when subscribing. (6) Sobrio is a group of bank and non-bank services available from the age of 15. Applicable Sobrio price conditions depend on the type of card subscribed to, and additional services, indicated in the "price conditions for individuals' bank transactions" brochure available in branch or a

WHEREVER YOU ARE, JUST MANAGE EASILY YOUR ACCOUNT

Log into your private account on

particuliers.societegenerale.fr with your customer code (at the top of your bank statement) and your secret code.

Download the app⁽¹⁾ Société Générale freely on Google Play or App Store⁽²⁾

1 I CLICK

TO ACCESS TO YOUR BANK

Access in one click to all your services on your computer, your Smartphone or your tablets. A 24/7 free service to make your operations.

2 I CODES

UNIQUE AND PERSONNALIZED

Your Customer Code: Find it at the top left of your account statement.

Your online secret code: It has been sent to you by post after your subscription. SAFE: You can personalize the 6-number banking secret code assigned to you.

We suggest you to change it at least twice a year.

3 I MINUTES

TO CHECK YOUR ACCOUNT

Each operation on your account is saved by date and category (achieved, in process of treatment, to come).

UPDATED > The last information about your operations will be online on the Société Générale App. You will have the same information as your advisor.

PRACTICAL > You can cancel your transfers from your PC (on the way or already done).

4 I YOUR ON-LINE BANK IS ALSO...



Exceptionally increase your credit card ceilings^{3).}



Simple et fast. Only a few seconds to make your money transfers in France and abroad.



Access to your IBAN and send it by e-mail, SMS, or print



Create your own alerts to optimize the management of your personal account



Consult your outstanding loans, insurance contracts and savings



Manage easily your expenses with the budget management tool



Stay in contact with your advisor thanks to a dedicated and secured mail box.

Your online Bank Requirements : ACTIVATE the security pass.

A quick and easy service to ensure your online transactions. Integrated into the Société Générale App⁽¹⁾, this new service allows you to check easily and quickly your online operations.



Find out our digital solutions on this link: www.societegenerale.fr/gagnerdutemps



PERSONAL FILE

IDENTITY			
☐ Female	☐ Male		
NAME :			
BIRTH NAME IF DIFFERENT :			
FIRST NAME :			
DATE OF BIRTH (JJ/MM/AA) :			
NATIONALITY:			
YOUR CONTACT			
PHONE NUMBER :			
MOBILE PHONE NUMBER :			
E-MAIL ADRESS :			
One day or another , we may have to check your identity. In order to do so, the safer is to answer the question you are the only one to knowChoose them well! (2 mandatory questions)			
What is your mother's maiden na	ame?	What is the name of your primary or high school?	
What is you second name?		When your first born child was borned ?	
When did you get married (or civ	vil union) ?	What was the movie you first saw at a theater?	
In which country did you first fly to?		What was the brand of your first car ?	
What was your first concert?			
YOUR SAVER PROFIL In order to determine you investor profile, thank you for answering the questions below :			
Regarding the management of your assets, Which affirmation matches you the best? In exchange of a zero or low performance, you refuse any downward for its value, therefore no loss. With the aim of preserving your wealth and a low performance, you accept a reduced risk of capital loss. In exchange of a positive performance, you accept a moderate risk of capital loss. In exchange of a significant performance, you accept a meaningful risk capital loss. In exchange of a great performance, you accept a high risk of capital loss. Number of stock market transactions (purchase or share sales) made over the last 12 months? I less than 5			
		3 1235s.x	
Made in	On	Signature	

Personal data. The personal data collected will be used by Société Générale for the purposes of verification of the address and for the management of the customer and commercial relation. They may, as expressly agreed upon and to the extent necessary to achieve the above purposes, be disclosed to other legal entities of Société Générale Group, as well as, if needed, to its partners, brokers and insurers, subcontractors and service providers established within or outside the European Economic Area, including to countries whose data protection legislation differs from the European Union legislation. These transfers take place under conditions and guarantees offering appropriate protection of your personal data. You may access to your personal data and obtain rectification or erasure of incomplete or inaccurate data. You may also object on legitimate grounds to the processing of your data. Your rights may be exercised by applying to the Société Générale branch where your account is opened.



AUTHORISATION

Authorisation to carry out bank transfer instructions sent by FAX or as a scanned attachment via secure messaging

By signing this document you authorise us to carry out your bank transfer requests when these are not originals sent by post or submitted by you in person to our branch. Note: You can make transfers of up to €4,000 per day to the SEPA zone via your Internet banking space. As such, this disclaimer only concerns transfers exceeding that limit or any other instruction.

	SOCIÉTÉ GÉNÉRALE AGENCE CLIENTÈLE PRIVÉE INTERNATIONALE 29 BD HAUSSMANN 75009 PARIS
	Place:
	Date:
I the undersigned,	
NAME :	FIRST NAME:
DATE OF BIRTH:	PLACE OF BIRTH AND COUNTRY:
Hereby request SOCIETE GENERALE, here	eafter 'the bank',
To carry out any instructions sent on my recinstruction matches the specimen of my sign	quest, by fax or as an attachment via secure messaging, as long as the signature on the nature held by the bank.
cannot offer total security, particularly those	or any consequences that may result from using such means of communication which e due to technical faults, address errors, lack of or imprecise instructions, or message t use that may be made of such instructions, as long as the signature checks have been
claim be accepted concerning said instruct	erve as evidence against the company as if they were originals, and in no event will any ions transmitted by fax or messaging after a period of three months from the date on tracing the transaction, except where there are shorter deadlines set out for uses or in tock transactions for example).
These instructions shall remain valid so acknowledgement of receipt.	long as they are not cancelled by one or other party by registered letter with
	Signature:

COPY 1 - THIS DOCUMENT IS TO BE RETAINED AND KEPT BY THE SOCIETE GENERALE BRANCH



AUTHORISATION

Authorisation to carry out bank transfer instructions sent by FAX or as a scanned attachment via secure messaging

By signing this document you authorise us to carry out your bank transfer requests when these are not originals sent by post or submitted by you in person to our branch. Note: You can make transfers of up to €4,000 per day to the SEPA zone via your Internet banking space. As such, this disclaimer only concerns transfers exceeding that limit or any other instruction.

	SOCIÉTÉ GÉNÉRALE AGENCE CLIENTÈLE PRIVÉE INTERNATIONALE 29 BD HAUSSMANN 75009 PARIS
	Place:
	Date:
I the undersigned,	
NAME :	FIRST NAME:
DATE OF BIRTH:	PLACE OF BIRTH AND COUNTRY:
Hereby request SOCIETE GENERALE, here	eafter 'the bank',
To carry out any instructions sent on my recinstruction matches the specimen of my sign	quest, by fax or as an attachment via secure messaging, as long as the signature on the nature held by the bank.
cannot offer total security, particularly those	or any consequences that may result from using such means of communication which e due to technical faults, address errors, lack of or imprecise instructions, or message t use that may be made of such instructions, as long as the signature checks have been
claim be accepted concerning said instruct	erve as evidence against the company as if they were originals, and in no event will any ions transmitted by fax or messaging after a period of three months from the date on tracing the transaction, except where there are shorter deadlines set out for uses or in tock transactions for example).
These instructions shall remain valid so acknowledgement of receipt.	long as they are not cancelled by one or other party by registered letter with
	Signature:

COPY 2 - THIS DOCUMENT IS TO BE RETAINED AND KEPT BY THE CLIENT



Accommodation certification

(A copy of a valid identity document and a proof of address less than 1 year old are mandatory to valid the present certification)

I, hereby undersigned,
Name:
First name :
Date of birth :Place of birth and Country :
Address:
Telephone / mobile :
Certify to host the following person at my home for at least 3 months :
Name:
First name :
Date of birth :
I hereby agree to inform and declare to SOCIÉTÉ GÉNÉRALE , the moment this person does no longe reside at my home.
Pursuant to Articles 441-7 et 441-9 from Penal Code, I am aware that there is a possibility o imprisonment and a penalty of 15.000 euros for false certification stating materially false or misleading statements.
Location Date
Signature :

* The fields designated in bold are required

Personal data

SOCIETE GENERALE may collect your personal data, as controller. The personal data collected are processed and are mandatory for identification and determination of your tax status and management of banking relationship according to legal obligations or applicable regulations. Your personal data may be stored for a period of five (5) years from the account closure or the end of the relationship for data and documents related to client identity. They may, to the extent necessary for the fulfillments of the above purposes, be disclosed to the competent authorities as tax authorities, other legal entities of Société Générale Group, as well as, to subcontractors and service providers. These transfers are processed in a manner and guarantees that ensures appropriate security and confidentiality of the personal data. As such, Société Générale takes all physical, technical and organizational measures needed to ensure the security and confidentiality of personal data which may be communicated to the official organs and administrative or judicial authorities of a country, particularly in the context of the fight against money laundering and terrorist financing, the fight against the fraud and for the determination of the tax status. You may access to your personal data, to obtain rectification and erasure, a right to restriction of processing, a right to object as well as a right to data portability, in the conditions defined by the applicable regulations. To exercise these rights, please contact your agency or Société Générale at the following address: Société Générale – Service Protection des données personnelles - CPLE/BDF/CPD – 75886 Paris Cedex 18. You may also contact the Data Protection Officer at the following email address: protectiondesdonnees@societegenerale.fr. You have the right to lodge a complaint with the Commission Nationale Informatique et Liberté (CNIL), the supervisory authority in charge of compliance with obligations regarding personal data.

FICHE DECLARATIVE DE PROFESSION ET DE REVENUS

Comment remplir ce document ? 1/ Compléter toutes les informations demandées 2/ Cocher les cases correspondant à votre situation 3/ Dater et signer A. MON IDENTITE Civilité : □ M. ☐ Mme ☐ Mlle Nom : Nom de naissance : **B. MON ACTIVITE PROFESSIONNELLE** Profession: ☐ Salarié : Employeur: Pays d'exercice de la profession : ☐ Etudiant : Nom de l'établissement : Date présumée de fin d'études :/..../..... ☐ Retraité : Depuis le :/..../.... ☐ Entrepreneur Individuel (Artisan, Commerçant, Profession libérale, Auto entrepreneur, Agriculteur...) ☐ Sans emploi:..... ☐ Autre : Précisez : C. MES REVENUS NETS MENSUELS Montant total de vos revenus nets mensuels (salaire, pension, retraite, allocation chômage, prestations sociales ou familiales, revenus fonciers, rente, etc.):......€ nets/mois. D. MON PATRIMOINE Résidence principale : Depuis le :/...../ ☐ Locataire ☐ Logé par un tiers/parent ☐ Accédant à la propriété ☐ Propriétaire Patrimoine brut (estimé)*: ☐ Moins de 7 500 € □ De 7 500 à 15 000 € □ De 15 000 à 50 000 € □ De 50 000 à 150 000 € □ De 150 000 à 350 000 € □ De 350 000 à 750 000 € □ De 750 000 à 1 500 000 € ☐ Plus de 1 500 000 € *Propriété de biens immobiliers, titres, produits d'épargne, etc. Je déclare sur l'honneur l'exactitude des informations ci-dessus. Fait à.....Le/..... Signature du déclarant

Données personnelles :

SOCIETE GENERALE est conduite à recueillir des données à caractère personnel vous concernant, en qualité de responsable de traitement. Les données collectées font l'objet de traitements et sont obligatoires pour répondre aux obligations légales et réglementations applicables en matière d'identification et connaissance de la clientèle et gestion de la relation bancaire.

Vos données à caractère personnel pourront être conservées pour une durée de cinq (5) ans à compter de la clôture du compte ou de la cessation de la relation pour les données et documents relatifs à l'identité des clients. Elles pourront au regard des finalités ci-dessus être communiquées aux autorités compétentes de type autorités fiscales et bancaires, aux personnes morales du groupe Société Générale ainsi qu'en tant que de besoin, à ses sous-traitants et prestataires, dans les limites nécessaires à l'exécution des finalités. Les transferts de données à caractère personnel rendus nécessaires interviennent dans des conditions et sous des garanties propres à assurer la confidentialité et la sécurité de ces données. À ce titre, Société Générale met en œuvre toutes les mesures techniques et organisationnelles appropriées pour assurer la sécurité de vos données à caractère personnel qui pourront également être communiquées, aux organismes officiels et aux autorités administratives et judiciaires habilitées du pays concerné, notamment dans le cadre de la lutte contre le blanchiment des capitaux et le financement du terrorisme, la lutte contre la fraude et la détermination du statut fiscal. Vous disposez d'un droit d'accès à vos données à caractère personnel, de rectification et d'effacement, de limitation du traitement ainsi que d'un droit à l'opposition dans les conditions prévues par la réglementation applicable. Vous pouvez exercer vos droits ainsi que contacter le délégué à la protection des données personnelles en vous adressant à l'agence où est géré/ ouvert le compte, par courrier électronique à l'adresse suivante protectiondesdonnees@societegenerale.fr, ou par courrier à l'adresse suivante : Société Générale - Service Protection des données personnelles - CPLE/BDF/CPD - 75886 Paris Cedex 18, en précisant l'objet de l'opération. Vous avez le droit d'introduire une réclamation auprès de la Commission Nationale de l'Informatique et des Libertés (CNIL), autorité de contrôle en charge du respect des obligations en matière de données à caractère personnel.

TAX RESIDENCY SELF-CERTIFICATION FORM

INDIVIDUAL

PLEASE DO NOT CROSS OUT ANY CLAUSES IN THIS FORM

TAX REGULATIONS

Please read the information below before completing the form

French Tax Regulations require SOCIETE GENERALE SA to collect and report certain information about the Account Holder's tax residency status. The term 'French Tax Regulations' refers to regulations created to enable the automatic exchange of information and includes the Foreign Account Tax Compliance Act ('FATCA') and the Organisation for Economic Co-operation and Development (OECD) Common Reporting Standard for Automatic Exchange of Financial Account Information ('CRS').

To enable SOCIETE GENERALE SA to comply with its obligation to report to the relevant tax authorities, you are required to state the residency for tax purposes of the person identified as the holder of a Financial Account. If the account has several holders, each account has to complete a form.

Do not use this form if the account holder is not an individual. Instead please complete the "Tax residency self-certification form – Entity".

You are required to complete all relevant sections in relation to all known accounts held with SOCIETE GENERALE SA and to provide any additional information as required to evidence the declaration made.

If any of the information about the tax residency below changes, you are required to provide an updated self-certification form along with supporting documentation as soon as possible and in any case no later than 90 days following such change.

Please note that any account holder failing to provide information regarding his tax residency(ies) and his Tax Identification Number(s) (TIN) is subject to a specific reporting to the French tax administration according to article L102 AG of the French "Livre des procédures fiscales" (Book of tax procedures) and is also subject to a penalty fine of EUR 1 500 according to article 1740C of the French "Code général des impôts" (French general tax code).

SOCIETE GENERALE SA is not allowed to fill this form on your behalf⁽¹⁾. If you have any questions on how to complete this form or how to determine your tax residence, you should contact a tax advisor or the local tax authorities.

PERSONAL DATA

For purpose of the application form, SOCIETE GENERALE SA may collect your personal data, as controller. The personal data collected are processed and are mandatory for identification and determination of your tax status according to legal obligations or applicable regulations. Your personal data may be stored for a period of five (5) years. They may, to the extent necessary for the fulfillments of the above purposes, be disclosed to the competent authorities as tax authorities, other legal entities of SOCIETE GENERALE Group, as well as, to subcontractors and service providers. These transfers are processed in a manner and guarantees that ensure appropriate security and confidentiality of the personal data. As such, SOCIETE GENERALE SA takes all physical, technical and organizational measures needed to ensure the security and confidentiality of personal data which may be communicated to the official organs and administrative or judicial authorities of a country, particularly in the context of the fight against money laundering and terrorist financing, the fight against the fraud and for the determination of the tax status. You may access to your personal data, to obtain rectification and erasure⁽²⁾, a right to restriction of processing⁽²⁾, a right to object as well as a right to data portability⁽²⁾, in the conditions defined by the applicable regulations. You may exercise your rights and contact the Data Protection Officer⁽²⁾ through your bank agency, by email to protectiondesdonnees@societegenerale.fr or by logging into your personal online space⁽²⁾. You have the right to lodge a complaint with the Commission Nationale Informatique et Liberté (CNIL), the supervisory authority in charge of compliance with obligations regarding personal data.

TAX RESIDENCY SELF-CERTIFICATION FORM

INDIVIDUAL

PLEASE DO NOT CROSS OUT ANY CLAUSES IN THIS FORM

1A - TITLE Last na	□ Miss □ Mrs □ Mr
l act no	
Middle	
First na	
Date of	birth* (DD-MM-YYYY)
Place o	f birth* (Town/City)
Postal (Code/ZIP Code* Country of birth*
1B - MAIN	ADDRESS
	r and Street*
	Sity/Province/State*
Postal	Code/ZIP Code* Country*
1C - MAILII	NG ADDRESS (if different from above)
	r and Street
	Code/7ID Code
	Code/ZIP Code Country Country
2 – COUNTR'	Y OF RESIDENCE FOR TAX PURPOSES – TAX IDENTIFICATION NUMBER (TIN)
2A - TAX R	
You are	e tax resident of (country)*
■ If yo	ou are tax resident of France
	ise provide the TIN: is the tax number appearing on the first page of your tax declaration or notice.
■ If yo	ou are not tax resident of France
	ise provide the TIN: TIN (Tax Identification Number) issued by your country tax of residence.
	If you are not able to provide a TIN, please state hereunder why: Non-issuing TIN country Other institution (a)
	Other justification(s):
2B - UNIQU	JE TAX RESIDENCE
	ereby certify that I am not a tax resident of any other country than the one indicated in section 2A . So ticked the box above, please go straight to section 4 (page 3), otherwise please fill in section 3 .
ADDITION	TAL COLINTRY/(EQ) OF PEOIDENCE(O) FOR TAX PURPOSES (I. L. CII. L. L. CIII. L. CIII. L. CIII. L. L. CIII. L.
	NAL COUNTRY(IES) OF RESIDENCE(S) FOR TAX PURPOSES (to be filled only if the 2B box e not been ticked)
	ddition to the country set out in 2A I am tax resident ⁽³⁾ in the following countries and the Entity's TIN in each additiona
country is set ou	t below:
Country	
TIN	l <u> </u>
Country	
TIN	I <u> </u>
Country	
	I <u> </u>
	If you are not able to provide a TIN, please state hereunder why:
	□ Non-issuing TIN country
	Other justification(s):

Mandatory

TAX RESIDENCY SELF-CERTIFICATION FORM

INDIVIDUAL

PLEASE DO NOT CROSS OUT ANY CLAUSES IN THIS FORM

4 - FATCA RI	EGULATION
I certify as the a	ccount holder*:
■ I am a	US citizen (multiple or unique nationality)*
☐ Yes	□ No
■ I am a	Specified US Person*
	e US Internal Revenue Service ("IRS") regulations: US citizenship, tax residence in the United States, detention of a valid green card
☐ Yes	□ No
	TO NOTE: Please not that if the YES box is checked at least once, you have to complete and provide the current IRS Form W-9 as soon as possible.
5 - DECLAR	ATION, UNDERTAKING AND SIGNATURE
Please read the fo	llowing indications and sign the form. Do not cross out any clause.
complete. I agree that I	at all statements made in this self-certification form are, to the best of my knowledge and belief, correct and will inform SOCIETE GENERALE SA of any change linked to my tax situation as soon as possible and no later than wing such change, and to provide a new form and supporting documentation.
current and fincome rever provide tax-re	we been informed that any information contained in this self-certification form and any information regarding my future financial account(s), including their balance(s) and income revenues transactions (dividends, interests, other nues and disposal proceeds), may be reported to: 1/ any authority to which SOCIETE GENERALE SA is required to egulated information, 2/ any other parties SOCIETE GENERALE SA considers necessary to comply with FATCA and ons, and to prevent the potential violation of these regulations.
copy of any II	re been informed that SOCIETE GENERALE SA can provide a copy of this self-certification form, and if necessary a RS (International Revenue Service) form filled out, as well as any other necessary information for the establishment of ion to any competent tax authority empowered to audit or control SOCIETE GENERALE SA for tax purposes.
related to my income reven	SOCIETE GENERALE SA to transmit any information contained in this self-certification form, as well as any information current and future account(s), including their balance(s) and income revenues transactions (dividends, interests, other nues and disposal proceeds) to any entity to which SOCIETE GENERALE SA could entrust all or part of its FATCA and ons, including any entity which, at the time of disclosure, belongs to SOCIETE GENERALE Group.
Revenue Ser	SOCIETE GENERALE SA to transmit a copy of this self-certification form and if necessary a copy of any IRS (Internal vice) form filled out as well as any other necessary information for the establishment of my tax situation to any entity time of disclosure, belongs to SOCIETE GENERALE Group.
Last name of th	
First name of th	
Signed in*	, , , , , , , , , , , , , , , , , , , ,
-	e account holder, precise in which title you are signing this form:
☐ Legal repres	sentative Guardian (for minors) Curator Other
Signature*	

For internal use SOCIETE GENERALE SA

Form to be used by SG Group entities located in a jurisdiction having signed an IGA 1 (Intergovernmental Agreement model 1)

Account holder ID number Received (DD-MM-YYYY)

* Mandatory.