Customer Information (Company) For Internal Use only



	Com	oamy's Particul	ars _					
Registered	Name: V. Group Gl	obal (Since	gapore) Pte.	Ud.				
Registered	Address: 10 Hor Chla	npred #13	1-02 keppel	Tong				
		s Coff31	15)					
Tel No.:	Fax No.:	Bt	ısiness No.:					
6885 0383 -			20152	CHARLES COLLARS COLLARS AND A				
Authorized	Contact Persons:	Contact No.:	Job Title.:	Nationality:				
1 Jane Jiang Ying /			F7uouce manager	Sinfaporean				
2.	Julian Julian State Stat	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
3)								
THE REPORT OF	t Checklist for Opening Nev	SHOOT REAL WATER SHOOT IN	Date Last Updated:					
	ccount Opening Form complet ubject to approval)	ed and signed by	Authorizing Directo	r or Manager				
THE REST WITH THE SOURCE IN	Photocopy of identity card (or passport for non-Singaporean) with photograph of ALL the Authorised Trading Persons							
, A.:	Photocopy of identity card (or passport for non-Singaporean) with photograph of <u>Director(s)</u>							
Z Co	Company business profile from ACRA of not later than 6 months							
For GEF us	se only:	- Control of the Cont	Varifia	d by				
Remarks:				Verified by: Sow Leng Date: 1917[16				
			Date:	1917/16				
			J					

Customer Particulars Form KYC for Corporate & Trading Authorisation



GOMPANY SPARTICULARS TO THE PARTY OF THE PAR								
REGISTERED NAME:								
V. Group Global (Singapore) Pre. Ltd. REGISTERED ADDRESS:								
10, Hoe	diang Road, #24-00	, Keppel Towers, S (089315)						
BUSINESS ADDRESS:								
10. Hoe chang Road, #13-02, Keppel Towers, S(089315)								
TEL NO.: 68850393	FAX NO.:	EMAIL ADDRESS:						
PLACE OF REGISTRATION:	DATE OF REGISTRATION:	REGISTRATION NO.:						
Singapore	22.07.2015	201529625M						
TYPE OF ENTITY:	1							
₩ COMPANY	☐ SOLE PROPRIETORSHIP	☐ PARTNERSHIP						
☐ LIMITED LIABILITY PARTNERSHI	P	☐ EXPRESS TRUST						
OTHER LEGAL ARRANGEMENT (Please Specify):								
OTHERS (Please Specify):	- interest							
Purpose and Intended Nature of Account Relationship and/or Relavant Business Transaction Undertaken								
Provide information on the purpose and intended nature of the account relationship and/or relevant business transaction undertaken. Please also state whether the transaction is for money-changing and/or for remittance purposes.								
For money-changing purpose.								
SOURCE OF PUNDS: 15 TO THE REPORT OF THE PURP OF THE P								
☐ BANK CREDIT LINE ☐ DIRECTORS' / SHAREHOLDERS' / SOLE PROPRIETOR'S INVESTMENTS								
OTHERS (Please Specify):		and the state of t						
POLITICALLY EXPOSED INDIVIDUALS:								
1. Is the beneficial owner or has the beneficial owner ever been entrusted with prominent public functions, whether								
In Singapore, in a foreign	in Singapore, in a foreign country, or in an International organisation? — Yes IV No							
	Is the beneficial owner or has the beneficial owner ever been a parent/ step-parent/ step-child, adopted child/ spouse/ sibling/ step-sibling/ adopted sibling of anyone who is or has been entrusted with prominent public							
functions, whether in Sing	functions, whether in Singapore, in a foreign country, or in an international organisation?							
☐ Yes	M No							
3. Is the beneficial owner or	has the beneficial owner ever been cl	osely connected, either socially or professionally						
l .	with anyone who is or has been entrusted with prominent public functions, whether in Singapore, in a foreign country, or in an international organisation?							
Country, or in an internati	onal organisation? ✓ No							
Air you an again acting on vehiclio) the customer liftyes please complete the following:								
NAME OF ENTITY/INDIVIDUAL: (Please Circle)								
ADDRESS.								
ADDRESS:								

Customer Particulars Form KYC for Corporate & Trading Authorisation



PLACE OF REGISTRATION/NATIONALITY:	REGISTRATION NO. /IDENTIFICATION NO.:		DATE OF REGISTRATION/ DATE OF BIRTH:		
RELATIONSHIP BETWEEN AGENT(S) AND CLIENT:		BASIS OF AUTHORITY(E.g Letter of authorisation or Board resolution, please attach):			
Appointment of staff acting on behalf o		reat East Forex			
1) AUTHORISED TRADING PERSONNEI					
FULL NAME:	IC/ PASSPORT NO.: S7878272B				
IOB TITLE:	9		NATIONALITY: Singapovean		
Jane Jiang Yi 10B TITLE: Finance Man	ager		SPECIMEN SIGNATURE:		
z) - (Authorisei) / Rading Personnei Full Name:		T.	IC/PASSPORT NO.:		
			NATIONALITY:		
JOB TITLE:	SPECIMEN SIGNATURE:				
SIGNATU	IRE OF DIRECTOR AND COMP	AND POR	DATE:		
1	€	The state of the s	19.07.2016		
DOCUMENT CHECKUST FOR OPENING NEW Account opening form completed		ector			
	copy of Identity Card (or Passport and valid Working Pass for non-Singaporean) with photograph of all the <u>Authorised</u>				
☐ Photocopy of Identity Card (or Pas	notocopy of Identity Card (or Passport and valid Working Pass for non-Singaporean) with photograph of Director(s)				
☐ Company business profile from AC	CRA of not later than 6 months	3			
1100					
FOR GEF USE ONLY:			181		
REMARKS:			VERIFIED BY:		
			DATE: 1/10/16		