Customer Particulars Form KYC for Corporate & Trading Authorisation



COMPANY'S PARTICULARS	VEG VOLUME	
Registered Name:	YES! XCHANGE Reg.No: 533560261.	YES! XCHANGE
Registered Address:	510 Tampines Central 1 #01-250D Singapore 520510	510, Tampines (ental 1 #01,2500, 5(520510)
Business Addréss:		Construction of Same as Registered Address
Tel No.: 69096580 Place of Registration:	Fax No.: Date of Registration:	Email: yesxchange & Qualle a Registration No.:
5) yeapure	09/02/17	53356026L
Type of Entity:		
□ Company €	Sole Proprietorship	☐ Partnership
☐ Limited Liability Partnership	☐ Express Trust	
Others (Please Specify):		
Please also state whether the transact	nd intended nature of the account relation is for money-changing and/or for relation in the second in a second in	
SOURCE OF FUNDS	1	
Bank Credit Line	Directors' / Shareholders' / S	Sole Proprietor's Investments
Others (Please Specify):		
POLITICALLY EXPOSED INDIVIDUALS:		
	as the beneficial owner ever been entrus n international organisation? No	sted with prominent public functions, whether in Singapore,
step-sibling/ adopted sibling	as the beneficial owner ever been a pare g of anyone who is or has been entered nternational organisation? No	ent/ step-parent/ step-child, adopted child/ spouse/ sibling/ with prominent public functions, whether in Singapore, in
 Is the beneficial owner or had who is or has been entrusted organisation? Yes 	as the beneficial owner ever been closed with prominent public functions, whe	tronnected, either socially or professionally with anyone ther in Singapore, in a foreign country, or in an international
;a	9	
	the customer? If yes, please complete t	the following:
Name of Entity/Individual: (Please Cir	cle)	
Address:	N .	
Place of Registration/Nationality:	Registration No. /Identification	n No.: Date of Registration/ Date of Birth:
Relationship between Agent and Clier	ot: Basis of Authority (F.g Letter o	of authorisation or board resolution, please attach):

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Appointment of staff acting on behalf of company to		
AUTHORISED TRADING PERSONNEL Full Name:	YES XCHANGE TO	Nationality:
Andres Salam Haja Mohimuden	9 7590005 H	Singaporeon
		olob Title:
yes xchange 88 Qquail.com	921402	Owner
Specimen Signature	1021	Main Contact Person for GEF account
Sler		enquiries
2) AUTHORISED TRADING PERSONNEL		
Full Name;	IC/Passport No.:	Nationality:
Jusult Pervare Sajicth	570656.80 7	Adren / SPR
Email:	Contact No :	Job Title: manage
Specimen Signalure:		Main Contact Person for GEF account enquiries
3) AUTHORISED TRADING PERSONNEL		
Full Name:	IC/Passport No.:	Nationality:
Email:	Contact No.:	Job Title:
Specimen Signature:		☐ Main Contact Person for GEF account enquiries
DECLARATION: I/We have furnished the above Information to the beswriting if there are any changes to be made to this for relationship are not derived from any criminal activities.	rm. I further confirm that the funds in rel	lation to these transactions or account
AUTHORISING OFFICER Name of Director:	IC/Passport No.:	Nationality:
Andres Salam Haja Mohinucles	5759000SH	Singepireon
email: yes xchange Ssagnail (om	Contact No.: 90214021	Main Contact Person for GEF account enquiries
Signature of Director and Company Stamp:		Date:
***************************************	THE PERSON NAMED IN COLUMN TO PERSON NAMED I	15/05/18
DOCUMENT CHECKLIST		
☐ Form completed and signed by Authorizing	Directo	
Photocopy of Identity Card (or Passport AN Trading Persons	D valid Working Pass for non-Singapore	an) with photograph of all the <u>Authorised</u>
☐ Photocopy of Identity Card (or Passport AN	D valid Working Pass for non-Singapore	an) with photograph of <u>Director(s)</u>
☐ Company business profile from ACRA of no	t later than 6 months	