

Customer Particulars Form
KYC for Corporate & Trading Authorisation



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|---|---|---------------------------------|
| COMPANY'S PARTICULARS | | |
| Registered Name: FILMTACK PTE LTD | | |
| Registered Address: No.25 Kaki Bukit Road 2, KB Warehouse Complex, Singapore 417850 | | |
| Business Address: <input checked="" type="checkbox"/> Same as Registered Address | | |
| Tel No.: 6746 3746 | Fax No.: 6741 1950 | Email: khphoon@filmtack.com |
| Place of Registration: Singapore | Date of Registration: 5th April 2004 | Registration No.: 200404056G |
| Type of Entity: <input checked="" type="checkbox"/> Company <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Express Trust <input type="checkbox"/> Others (Please Specify): _____ | | |
| Purpose and Intended Nature of Account Relationship and/or Relevant 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. Primary Purpose: Convert USD earnings into SGD for local company expenses Secondary Purpose: Convert USD earnings into SGD to repay local debts denominated in SGD | | |
| SOURCE OF FUNDS | | |
| <input type="checkbox"/> Bank Credit Line <input type="checkbox"/> Directors' / Shareholders' / Sole Proprietor's Investments <input checked="" type="checkbox"/> Others (Please Specify): <u>Business Proceeds - our revenue are primarily denominated in USD</u> | | |
| 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 country, or in an international organisation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 2. 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 Singapore, in a foreign country, or in an international organisation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 3. Is the beneficial owner or has the beneficial owner ever been closely connected, either socially or professionally with anyone who is or has been entrusted with prominent public functions, whether in Singapore, in a foreign country, or in an international organisation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| Are you an agent acting on behalf of the customer? If yes, please complete the following: Name of Entity/Individual: (Please Circle) Address: Place of Registration/Nationality: Registration No./Identification No.: Date of Registration/ Date of Birth: Relationship between Agent and Client: Basis of Authority (E.g Letter of authorisation or board resolution, please attach): | | |

NOT APPLICABLE

Customer Particulars Form
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大東外匯機構
Great East Forex

Appointment of staff acting on behalf of company to trade with Great East Forex

1) AUTHORISED TRADING PERSONNEL

| | | |
|-------------------------------|-------------------------------|---|
| Full Name: POON KIANG HAU | IC/Passport No.: S8030714D | Nationality: SINGAPORE |
| Email: khpoon@filmtack.com | Contact No.: 6746 3746 | Job Title: Director |
| Specimen Signature: | | <input checked="" type="checkbox"/> Main Contact Person for GEF account enquiries |

2) AUTHORISED TRADING PERSONNEL

| | | |
|-------------------------------|-------------------------------|--|
| Full Name: POON JIANXING | IC/Passport No.: S8200678H | Nationality: SINGAPORE |
| Email: jxpoon@filmtack.com | Contact No.: 6746 3746 | Job Title: Director |
| Specimen Signature: | | <input type="checkbox"/> Main Contact Person for GEF account enquiries |

3) AUTHORISED TRADING PERSONNEL

| | | |
|-------------------------------|-------------------------------|--|
| Full Name: LUM SHIHUI | IC/Passport No.: S8413880J | Nationality: SINGAPORE |
| Email: shihui@filmtack.com | Contact No.: 6746 3746 | Job Title: Manager |
| Specimen Signature: | | <input type="checkbox"/> Main Contact Person for GEF account enquiries |

DECLARATION:

I/We have furnished the above information to the best of my knowledge, information and belief, and will duly inform Great East Forex in writing if there are any changes to be made to this form. I further confirm that the funds in relation to these transactions or account relationship are not derived from any criminal activities, tax evasion or intended for any criminal use.

AUTHORISING OFFICER

| | | |
|--|-------------------------------|--|
| Name of Director: POON TEO KIM | IC/Passport No.: S0068855Z | Nationality: SINGAPORE |
| Email: tkpoon@filmtack.com | Contact No.: 6746 3746 | <input type="checkbox"/> Main Contact Person for GEF account enquiries |
| Signature of Director and Company Stamp: | | Date: 28 Jan 2018 |

DOCUMENT CHECKLIST

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|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Form completed and signed by Authorizing Director |
| <input checked="" type="checkbox"/> | Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of all the <u>Authorised Trading Persons</u> |
| <input checked="" type="checkbox"/> | Photocopy of Identity Card (or Passport AND valid Working Pass for non-Singaporean) with photograph of <u>Director(s)</u> |
| <input checked="" type="checkbox"/> | Company business profile from ACRA of not later than 6 months |

FOR GEF USE ONLY:

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|----------|--------------|
| Remarks: | Verified By: |
| | Date: |