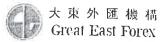
## Customer Particulars Form KYC for Corporate & Trading Authorisation



COMPANY'S PARTICULARS		
REGISTERED NAME:	LEC PIE LID	
REGISTERED ADDRESS:		
OU ROFFIES PLACE, I	12-05 CHPICK-D CEN	TK.E. STMCIAPORE 048621
BUSINESS ADDRESS:		☐ SAME AS REGISTERED ADDRESS
TEL NO .: LOUISA - 9787 9799	FAX NO,:	EMAIL ADDRESS: ICUISA COLIVIA CICO. LAY
OFFICE: 6513 3350		fs & olivia - international com
PLACE OF REGISTRATION:	DATE OF REGISTRATION:	REGISTRATION NO.:
SINGHPORE	18th APRIL 2017	HISTOTIOG
TYPE OF ENTITY:		
COMPANY	SOLE PROPRIETORSHIP	☐ PARTNERSHIP
☐ LIMITED LIABILITY PARTNERSHIP		☐ EXPRESS TRUST
OTHER LEGAL ARRANGEMENT (F	Please Specify):	
OTHERS (Please Specify):		
Purpose and Intended Nature of Accou	nt Relationship and/or Relevant Busin	acc Transaction Undertaken
SOURCE OF FUNDS  BANK CREDIT LINE	☐ DIRECTORS' / SHAREHOLD	ERS' / SOLE PROPRIETOR'S INVESTMENTS
☐ OTHERS (Please Specify):	E DIRECTORS / SHAREHOLDI	ERS / SOLE PROPRIETOR'S INVESTMENTS
POLITICALLY EXPOSED INDIVIDUALS:		
<ol> <li>Is the beneficial owner or had in Singapore, in a foreign co</li> <li>Yes</li> </ol>	as the beneficial owner ever been untry, or in an international organ No	entrusted with prominent public functions, whether isation?
spouse/ sibling/ step-sibling	as the beneficial owner ever been a / adopted sibling of anyone who is pore, in a foreign country, or in an No	a parent/ step-parent/ step-child, adopted child/ or has been entrusted with prominent public international organisation?
with anyone who is or has b country, or in an internation	een entrusted with prominent pub al organisation?	closely connected, either socially or professionally lic functions, whether in Singapore, in a foreign
☐ Yes	No No	
Are you an agent acting on behalf of the NAME OF ENTITY/INDIVIDUAL: (Please Cir		e following:
Or Entity Minimum Art. (Mease Cit	ue)	
ADDRESS:		

Page 1 of 2

A subsidiary company of **Great East Enterprise Pte Ltd** *Reg No.: 40238800C*101 Beach Road, #02-02 The 101, Singapore 189703 Tel: +65 6339 2828 Fax: +65 6334 2013

GEF/AML/CFT/02/2016/KYC FORM A

PLACE OF REGISTRATION/NATIONAL	ITY: REGISTRATIO	Lion N NO. /IDENTIFICATION NO.:	Great East Fore	
	1	,	STATE OF MESISTIATION, DATE OF BIRTH.	
RELATIONSHIP BETWEEN AGENT(S) A	AND CLIENT:	BASIS OF AUTHORITY( E.g Letter of authorisation or Board resolution, please attach):		
Appointment of staff acting on b		trade with Great East Forex	The second secon	
AUTHORISED TRADING PER	SONNEL	7/2013		
FULL NAME; ANG EE MUI LOUISA /			IC/PASSPORT NO.: SS341232+)	
			NATIONALITY: SINGHPORETIN	
JOB TITLE:			SPECIMEN SIGNATURE:	
FINANCE MANAGER			Cusyl	
2) AUTHORISED TRADING PERS FULL NAME:	SONNEL			
FULL NAIVIE:			IC/PASSPORT NO.:	
			NATIONALITY:	
OB TITLE:			SPECIMEN SIGNATURE:	
DECLARATION:				
I/We have furnished the above inforwriting if there are any changes to be relationship are not derived from an	e made to this form. I fui y criminal activities or in: NAME OF DIRECTOR	rther confirm that the funds in r tended for any criminal use.	elief, and will duly inform Great East Forex elation to these transactions or account	
I/We have furnished the above inforwriting if there are any changes to be relationship are not derived from an AUTHORISING OFFICER	e made to this form. I fur y criminal activities or in NAME OF DIRECTOR FARID FAZAL	rther confirm that the funds in r tended for any criminal use.	NRIC No.:  Z342 350 3	
I/We have furnished the above inforwriting if there are any changes to be relationship are not derived from an AUTHORISING OFFICER	e made to this form. I fui y criminal activities or in: NAME OF DIRECTOR	rther confirm that the funds in r tended for any criminal use.	elation to these transactions or account	
I/We have furnished the obove inform writing if there are any changes to be relationship are not derived from an AUTHORISING OFFICER	e made to this form. I fur y criminal activities or initial NAME OF DIRECTOR FARID FAZAL IGNATURE OF DIRECTOR	SABU WALLER AND COMPAN	NRIC NO.:  Z342.3503  DATE:	
I/We have furnished the obove inforwriting if there are any changes to be relationship are not derived from an AUTHORISING OFFICER  S  DOCUMENT CHECKLIST FOR OPENING	e made to this form. I fur y criminal activities or in NAME OF DIRECTOR FARID FAZAL  IGNATURE OF DIRECTOR  IGNEW COMPANY ACCORD	SABU WALLAND COMPAN COUNT	NRIC NO.:  Z342.3503  DATE:	
I/We have furnished the obove inforwriting if there are any changes to be relationship are not derived from an AUTHORISING OFFICER  S  DOCUMENT CHECKLIST FOR OPENING  Account opening form com	e made to this form. I fur y criminal activities or installing NAME OF DIRECTOR FARID FA2AL IGNATURE OF DIRECTOR	SABU ON AND COMPAN CONTROL OF THE PROPERTY OF	NRIC NO.:  Z342.3503  DATE:	
I/We have furnished the obove inforwriting if there are any changes to be relationship are not derived from an AUTHORISING OFFICER  AUTHORISING OFFICER  S  DOCUMENT CHECKLIST FOR OPENING  Account opening form com  Photocopy of Identity Card Trading Persons	e made to this form. I fur y criminal activities or installing NAME OF DIRECTOR FARID FA2AL IGNATURE OF DIRECTOR OR NEW COMPANY ACCOUNTS	SABU ON PARTIES OF THE PARTIES OF TH	NRIC NO.:  Z3423503  DATE:  397H JUNE 2017	

VERIFIED BY:

DATE:

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FOR GEF USE ONLY: REMARKS: