

IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT AT CITIGROUP

To help the United States Government fight terrorism and money laundering, Federal law requires us to obtain, verify, and record information that identifies each person or business that opens an account or establishes a relationship. What this means for you: When you open an account or establish a relationship, we will ask for your name, date of birth, street address, and a government issued identification number (for U.S. persons, you must also provide a social security number or taxpayer identification number). Federal law requires us to obtain this information. We may also ask to see other government issued identification or other identifying documents that will allow us to identify you. We appreciate your cooperation.

Information from a credit bureau may be used to determine your account eligibility.

CCOUNT APPLICATION o not use correction fluid to make corrections, as this will void y ourapplication. Please mark non-applicable fields - N/A.	
tibank Branch of Preference: O Miami O New York O San Francisco tibank Account Relationship Package: O Citigold® International Account Package at Citigold® International	
Individual In Trust For (please include a Beneficiary form) Joint Tenants in Common (JTIC) (Indicate % of Applicant's estate next to name of Applicant in Account Title section) Add New Account Owner/Signer: Account Number(s)	
CCOUNT TITLE: Print complete name clearly. (Max. of 20 letters for last name, 12 letters for first name and 12 letters for middle name.)
rimary Applicant Name: (Minor's Name if UTMA account)	
Dr. OMr. OMrs. OMs. Joint Tenants in Common (JTIC)	%
st First Middle	
p-Applicant Name (A): (Custodian's Name if UTMA account)	
Dr. OMr. OMrs. OMs. Joint Tenants in Common (JTIC)	%
st First Middle	
p-Applicant Name (B):	
Dr. OMr. OMrs. OMs. Joint Tenants in Common (JTIC)	%
st First Middle	
p-Applicant Name (C):	
Dr. OMr. OMrs. OMs. Joint Tenants in Common (JTIC)	%
st First Middle	

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bank and non-bank affiliates of Citigroup Inc.

Banking products and services are provided by Citibank, N.A., member FDIC.

Citigold® International is a United States business that provides its clients access to a broad array of products and services available through various

PRIMARY APPLICANT INFORMATION (Minor Information if UTMA Account)	
Primary Applicant Name: (Minor's Name if UTMA account) O Dr. O Mr. O Mrs.	O Ms.
Last First Middle	
Are you an existing Citigold® International customer?	
If "Yes," please indicate if you want the balances on this account to be included ("linked") as part of your existing relationship in order to potentially lower fees and higher interest rates. Please note your total relationship balance tier will be displayed on your statement if you select this option. • Yes	
Do you have an existing account with another Citibank or Citigroup affiliate? Yes No	
If "Yes," please indicate the account(s) number(s):	
ADDRESS & TELEPHONE	
Residential Address: include apartment or suite number if applicable (Max. 35 letters) DO NOT USE A P.O. BOX	
City and State: (Max. 32 letters) Address since: mn	n/yyyy
Postal Code: (if applicable) Country:	
Previous Residential Address: (Required only if you have lived at your current address for less than 2 years.)	
Include apartment or suite number if applicable. (Max. 35 letters) DO NOT USE A P.O. BOX	
City and State: (Max. 32 letters) Address since: mn	hoon
Address since: (max. 32 letters)	1/ y y y y
Postal Code: (if applicable) Country:	
Home Phone Number: (must match residential address) Business Phone Number (optional): Country Code City	
Country Code City Code Line Number Country Code City Code Line Number Extension	
Cellular Phone Number (optional): Fax Number (optional):	
Country Code City Code Line Number Country Code	
Mailing Address (if different from residential address): include apartment number if applicable (Max. 35 letters)	
City and State: (Max. 32 letters)	
Postal Code: Country:	
CM and Francisco O May O No. O No. 16 Who I also a specific CEID.	
Citigroup Employee: O Yes O No If "Yes," please provide: GEID Department	ficial
CITIZENSHIP & TAX REPORTING STATUS	
Your Citizenship Status: O U.S. Citizen O Non-Resident Alien O Resident Alien	
Country of Citizenship (if non-U.S. resident): Country of Tax Reporting (if non-U.S. person):	
Date of Birth: mm/dd/yyyy U.S. Social Security/Tax Identification Number: (if applicable)	
SECURITY INFORMATION	
SECORIT INI ORIMATION	
O Name of First School Attended AND Mother's Maiden Name	
○ Name of First School Attended AND ○ Mother's Maiden Name	
O Name of First School Attended AND O Mother's Maiden Name IDENTIFICATION	
Name of First School Attended AND Mother's Maiden Name DENTIFICATION Passport (preferred) Other Government ID only if no passport available: ID Type:	
O Name of First School Attended AND O Mother's Maiden Name IDENTIFICATION	
O Name of First School Attended AND O Mother's Maiden Name IDENTIFICATION	
O Name of First School Attended AND O Mother's Maiden Name IDENTIFICATION	

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CO-APPLICANT INFORMATION (A) (CUSTOUIAN INIOTHIALIOTHI O TIMA ACCOUNT)	
Co-Applicant (A) Name (Custodian's Name if UTMA account):	○ Dr. ○ Mr. ○ Mrs. ○ Ms.
Last First Midd	dle
Are you an existing Citigold® International customer? O Yes O No Account Number(s)	
If "Yes," please indicate if you want the balances on this account to be included ("linked") as part of your existing rela lower fees and higher interest rates. Please note your total relationship balance tier will be displayed on your statement in the statemen	
Do you have an existing account with another Citibank or Citigroup affiliate? $$ $$ Yes $$ $$ No	
If "Yes," please indicate the account(s) number(s):	
ADDRESS & TELEPHONE	
Residential Address: include apartment or suite number if applicable (Max. 35 letters) DO NOT USE A P.O. BOX	
City and State: (Max. 32 letters)	Address since: mm/yyyy
Postal Code: (if applicable) Country:	
Previous Residential Address: (Required only if you have lived at your current address for less than 2 years.) Include apartment or suite number if applicable. (Max. 35 letters) DO NOT USE A P.O. BOX	
Include apartment of suite number if applicable. (Max. 35 letters) DO NOT OSE A P.O. BOX	1 1 1
City and State: (Max. 32 letters)	Address since: mm/yyyy
Postal Code: (if applicable) Country:	I
Home Phone Number: (must match residential address) Business Phone Number (optional):	
Country Code City Code Line Number Country Code City Code Line Number Country Code City Code Cit	tension
Cellular Phone Number (optional): Fax Number (optional):	
Country Code City Code Line Number Country Code City Code	
Mailing Address (if different from residential address): include apartment number if applicable (Max. 35 letters)	
City and State: (Max. 32 letters)	I
Post 10 day	
Postal Code: Country:	1
Citiaraum Emplayees Q Vos. Q No. 16 "Vos." plaase provider CEID	<u> </u>
Citigroup Employee: O Yes O No If "Yes," please provide: GEID Department MSSB Employee? O Yes O No CGMI Employee? O Yes O No Citigroup Subsidiary Employee: O Yes O No Reg C	
CITIZENSHIP & TAX REPORTING STATUS	
Your Citizenship Status: O U.S. Citizen O Non-Resident Alien O Resident Alien	
Country of Citizenship (if non-U.S. resident): Country of Tax Reporting (if non-U.S. p	person):
Date of Birth: mm/dd/yyyy	n Number: (if applicable)
SECURITY INFORMATION	
○ Name of First School Attended AND ○ Mother's Maiden Name	
IDENTIFICATION	
○ Passport (preferred) ○ Other Government ID only if no passport available: ID Type:	
Issuing country: Number: Date Issued mm/dd/yyyy:	Expiration mm/dd/yyyy:
Other Govt. Issued Identification: ID Type	
Other Govt. Issued Identification: ID Type IDENTIFY Date Issued mm/dd/yyyy:	Expiration mm/dd/yyyy:
Other Identification:	
Issuing country: Number: Date Issued mm/dd/yyyy:	Expiration mm/dd/yyyy:

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CO-APPLICANT INFORMATION (B)		
Co-Applicant (B) Name	O Dr.	○ Mr. ○ Mrs. ○ Ms.
Last First Mid	ldle	
Are you an existing Citigold® International customer?		
If "Yes," please indicate if you want the balances on this account to be included ("linked") as part of your existing relower fees and higher interest rates. Please note your total relationship balance tier will be displayed on your statement		
Do you have an existing account with another Citibank or Citigroup affiliate? O Yes O No		
If "Yes," please indicate the account(s) number(s):		
ADDRESS & TELEPHONE		
Residential Address: include apartment or suite number if applicable (Max. 35 letters) DO NOT USE A P.O. BOX		
City and State: (Max. 32 letters)	1	Address since: mm/yyyy
Postal Code: (if applicable) Country:	1	
Previous Residential Address: (Required only if you have lived at your current address for less than 2 years.)	_	
Include apartment or suite number if applicable. (Max. 35 letters) DO NOT USE A P.O. BOX		1
City and States (May 22 Interes)		Address sines mm (nan
City and State: (Max. 32 letters)	1 '	Address since: mm/yyyy
Postal Code: (if applicable) Country:	_	
Home Phone Number: (must match residential address) Business Phone Number (optional):	_	
Country Code City Code Line Number Country Code City Code Line Number E	xtension	
Cellular Phone Number (optional): Fax Number (optional):		_
Country Code City Code Line Number Country Code City Code		
Mailing Address (if different from residential address): include apartment number if applicable (Max. 35 letters)		I
City and State: (Max. 32 letters)	1	
Postal Code: Country:	_	
Citigroup Employee: O Yes O No If "Yes," please provide: GEID	⊐ nt	
MSSB Employee? O Yes O No CGMI Employee? O Yes O No Citigroup Subsidiary Employee: O Yes O No Reg		Non-official O Official
CITIZENSHIP & TAX REPORTING STATUS		
Your Citizenship Status: O U.S. Citizen O Non-Resident Alien O Resident Alien		
Country of Citizenship (if non-U.S. resident): Country of Tax Reporting (if non-U.S.	person):	
Detect Pictures (Idd and	- N	(f f h l -)
Date of Birth: mm/dd/yyyy	n Number: (,if applicable)
SECURITY INFORMATION		
O Name of First School Attended AND O Mother's Maiden Name		
IDENTIFICATION		
○ Passport (preferred) ○ Other Government ID only if no passport available: ID Type:		
Issuing country: Number: Date Issued mm/dd/yyyy:	Expira	ntion mm/dd/yyyy:
Other Govt. Issued Identification: D Type		
Issuing country: Number: Date Issued mm/dd/yyyy:	Expira	tion mm/dd/yyyy:
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Other Identification: ID Type		
Issuing country: Number: Date Issued mm/dd/yyyy:	Expira	tion mm/dd/yyyy:
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CO-APPLICANT INFORMATION (C)	
Co-Applicant (C) Name	Ms.
Last First Middle	
Are you an existing Citigold® International customer?	l
If "Yes," please indicate if you want the balances on this account to be included ("linked") as part of your existing relationship in order to potentially recover fees and higher interest rates. Please note your total relationship balance tier will be displayed on your statement if you select this option. • Yes	
Do you have an existing account with another Citibank or Citigroup affiliate? • Yes • No	
If "Yes," please indicate the account(s) number(s):	
ADDRESS & TELEPHONE	
Residential Address: include apartment or suite number if applicable (Max. 35 letters) DO NOT USE A P.O. BOX	
City and State: (Max. 32 letters) Address since: mm/yy	уу
Postal Code: (if applicable) Country:	
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Previous Residential Address: (Required only if you have lived at your current address for less than 2 years.) Include apartment or suite number if applicable. (Max. 35 letters) DO NOT USE A P.O. BOX	
City and State: (Max. 32 letters) Address since: mm/yy	уу
Postal Code: (if applicable) Country:	
Home Phone Number: (must match residential address) Business Phone Number (optional):	
Country Code City Code Line Number Country Code City Code Line Number Extension	
Cellular Phone Number (optional): Fax Number (optional): Country Code City Code Line Number Country Code City Code	
Mailing Address (if different from residential address): include apartment number if applicable (Max. 35 letters)	
City and State: (Max. 32 letters)	
District Control	
Postal Code: Country:	
Citizens Francisco O Ven O No. 16 IV/20 II alega reguido CFID	
Citigroup Employee: ○ Yes ○ No If "Yes," please provide: GEID	_
CITIZENSHIP & TAX REPORTING STATUS	
Your Citizenship Status: O U.S. Citizen O Non-Resident Alien O Resident Alien	
Country of Citizenship (if non-U.S. resident): Country of Tax Reporting (if non-U.S. person):	
Date of Birth: mm/dd/yyyy	L
SECURITY INFORMATION	
○ Name of First School Attended AND ○ Mother's Maiden Name	
O Name of First School Attended AND O Mother's Malden Name	
IDENTIFICATION	
O Passport (preferred) O Other Government ID only if no passport available: ID Type:	
Issuing country: Number: Date Issued mm/dd/yyyy: Expiration mm/dd/yyyy:	l
Other Govt. Issued Identification: ID Type	<u> </u>
Issuing country: Number: Date Issued mm/dd/yyyy: Expiration mm/dd/yyyy:	
	<u>L</u>
Other Identification: ID Type	J
Issuing country: Number: Date Issued mm/dd/yyyy: Expiration mm/dd/yyyy:	

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SELECT YOUR CHECKING	ACCOUNT	(Complete all that apply, indica	ating desired U.S	. dollar amount)	
Please select the type of chec	king accoun	t you wish to include in your Acc	count Relationshi	p Package.	
O Regular Checking OR C	Interest C	hecking			
To link money market accou	ınts and cer	tificates of deposit to your acc	count relationsh	ip package, please contact CitiPhone Banking®.	
Checkbooks: Do you require a checkbook	for the che	ecking account selected above	e? (If this section	n is left blank, no checkbook will be ordered.)	Yes O No
If "Yes," indicate items to b	e printed o	n your checks (there may be a	a charge for che	ckbooks, please refer to the schedule of fees an	d charges):
O Name of Primary Account	Owner	O Name of Co-Account Own	ner (A)	O Name of Co-Account Owner (B)	
O Name of Co-Account Own	er (C)	O Print mailing address		O Blank, do not print anything	
CITIBANK® BANKING CA	RD				
automatically be linked to the	eir existing (convenient acc	bit card feature. For existing Account Owners, the ress. If you prefer not to receive a Citibank® Bankingow.	
	Existin	g Customer:	New Cust	omer:	
Primary Account Owner:	O Do n	ot link to my existing card	O No, do	not send a card	
Co-Account Owner (A):	O Don	ot link to my existing card	O No, do	not send a card	
Co-Account Owner (B):	O Do n	ot link to my existing card	O No, do	not send a card	
Co-Account Owner (C):	O Do n	ot link to my existing card	O No, do	not send a card	
To link money market accou	ınts and cer	tificates of deposit to your acc	count relationsh	nip package, please contact CitiPhone Banking®.	
Package will be sent to the P	rimary Acco	_	anent Address. (A	Account Owner. If your Mailing Address is a P.O. Bo A P.O. Box is not acceptable for courier deliveries.) Welcome Package below:	x, your Welcome
preference in all of our commenglish version of communic	you authornunications. cations we so	English is the controlling languend you in Spanish.	uage governing	possible in Spanish. We may not be able to acc your banking relationship with us. You can contact	t us to obtain an
use the email address you p will not be able to "reply" to	rovided for these systen	account servicing and mainten n-generated emails. To protect	nance requests/r your privacy, we	pedite your account opening process. You also ago nessages once your account is opened. You unde will not request or send confidential account infor overn future electronic communications we may s	rstand that you mation through
Email:					
I					

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ACCOUNT AGREEMENT

DEFINITION OF TERMS

In this agreement, "I", "we", "my", "me", "us" and "our" refer to the Applicant(s) signing below and "you", and "your" refer to Citigold® International ("CI") business at Citibank, N.A., as applicable.

By signing this application and the signature cards, I/we certify and/or acknowledge that:

- The information above is accurate to the best of my/our knowledge, information and belief. I/We agree to inform you of any changes to the
 information provided during my/our account opening process.
- I/We hereby expressly authorize the disclosure of my/our account or other relevant information to any Citigroup businesses, Legal or Compliance Personnel in order to conduct the necessary account opening and approval process(es). My/Our signature(s) below indicate(s) my/our waiver of any rights I/we may have under applicable local laws or other laws including, but not limited to, Privacy or Secrecy Laws prohibiting such disclosure.
- I/We have received a copy of the Citibank Client Manual Consumer Accounts, the Citibank, N.A. Marketplace Addendum for Citigold® International clients and the Consumer Deposit Accounts rate sheet, collectively referred to as "Account Disclosures," which outlines all the terms and conditions associated with my/our account(s) at Citibank, N.A. I/We have read and understand all the material outlined in the Account Disclosures and agree to be bound by the same.
- I/We agree to the Account Disclosures for the account(s) or service(s) mentioned herein, and that the same Account Disclosures and signature requirements will apply to any additional Citibank accounts I/we may subsequently apply for and establish with Citibank and its subsidiaries and affiliates. I/We agree that Citibank may make changes to these Account Disclosures at any time without prior notice to me/us unless otherwise required by law.
- Written communications and notices, including but not limited to confirmations and statements of account will be sent to the mailing address provided on this application, or at such other address as I/we may hereafter provide you in writing. All communications so sent, whether by mail, telegraph, messenger or otherwise, shall be deemed given to me/us personally, whether actually received or not. I/We are responsible for being aware of all information contained in the statements and notices received at the mailing address relevant to my/our account(s) with Citibank, N.A. opened through Cl. You may, at your discretion, mail certain correspondence, such as certifications, legal notices, account term amendments, certain confirmations, and other special documentation, to my/our domicile address of record in your files, directly, without sending it to the mailing address designated on the Application. I/We assume all risks associated with the use of the this mailing address per my/our instructions and I/we agree that, Citibank, N.A., Citigroup, and their branches, affiliates, subsidiaries, officers, directors, employees or agents are not liable for, and will be held harmless by me/us, from any claims, suits or damages resulting from the mailing of written communications and notices to the mailing address indicated in your account records, including losses or damages resulting from your failure to receive such statements and notices.
- Products and services offered by Citi and its affiliates are subject to the applicable local laws and regulations of the jurisdiction where they
 are booked and offered. Products and services through Citibank, N.A. are governed by U.S. Federal law and regulations. To the extent that such
 laws and regulations do not apply, these products and services shall be governed by and be construed in accordance with the laws of the
 U.S. State of the Citibank Branch in which my/our account(s) is/are located.





By signing this application and the signature cards, I/we also certify and/or acknowledge that:

- I/We have received this application and other account opening documentation at my/our request and that any and all prior communications with you pertaining to account opening and product offering were solicited by me/us (initiated by me/us) or on my/our behalf. I/We am/are expressly inquiring and requesting information about the following types of products and services, to the extent permitted by all applicable laws: banking deposit and lending products and services, Citibank® Banking Cards and Citibank online services.
- My/Our country of citizenship, domicile or residence may have laws, rules and regulations, I/we am/are solely responsible for, that govern or affect my/our application for and use of your accounts, products and services, including laws, rules and regulations regarding taxes, exchange and/or capital controls. I/We acknowledge and certify that neither Citibank nor any other Citibank's Affiliated Organization has any responsibility for, my/our compliance with any laws, regulations or rules applicable to my/our use of the products and services provided by Citibank under this Agreement including, but not limited to, any laws, regulations or rules, in my/our or any other jurisdiction, relating to tax, foreign exchange and capital control, and for reporting or filing requirements that may apply as a result of my/our country of citizenship, domicile, residence or taxpaying status.
- I/We understand that transactions may be executed outside of my country and without any participation from any Citigroup or Citibank subsidiary, branch or affiliate in my country. Some products may not be registered with the Financial Regulatory body of my country governing such financial products, nor may they be governed or protected by the laws and regulations of my country.
- I/We understand that the translation of this application from English to another language are provided to you for convenience only, and I/we understand and agree that the English language version of this application will control and be conclusive in the event of any difference in meaning between the translation and the English language version.

SIGNATURES	
Primary Applicant Signature	Date: mm/dd/yyyy
Co-Applicant (A) Signature	Date: mm/dd/yyyy
Co-Applicant (B) Signature	Date: mm/dd/yyyy
Co-Applicant (C) Signature	Date: mm/dd/yyyy

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FOR INTERNAL USE ONLY Financial Professional Name: Financial Professional Code: ______ Source Code: _____ AAM No.:_____ Prospect Number: Account Opening Channel (How customer initially requested account to be opened): O Mail O Branch (walk-in) O Back office (In-country referral) "Address since" verified with client(s) Primary Applicant: O Yes O No Co-Applicant (A): • Yes • No Co-Applicant (B): O Yes O No Co-Applicant (C): O Yes O No "Previous" verified with client(s) Primary Applicant: O Yes O No Co-Applicant (A): O Yes O No Co-Applicant (B): Co-Applicant (C): • Yes • No O Yes O No Signature of individual signer(s) are verified by: (Financial Professional) Date: Printed full name and GEID Signature mm/dd/yyyy

Signature

Signature

Date:

Date:

mm/dd/yyyy

mm/dd/yyyy

Printed full name and GEID

Printed full name and GEID

Reviewed by:*

Application accepted by: __

^{*} Help desk, Fincon, Buco, etc. For more information on authorized parties, please contact your manager.

ACCOUNT SIGNATURE CARD



DATE:	FIMP:				
BRANCH:	O Miami	O New York	K	San Francisco	
Account Title:					
Check appropriate box:	O Individual	O Joint (sig	gning individually)	Other	
Account Number(s):					
TERMS By signing this card, I: (1) authorize Citiba original signature. You may accept my ora provide my signature upon request. You mainstructions and for service quality purpos account I apply for and I understand that you upon request, you will inform me if a consu by any agreement governing any account of Citibank or I can require that any disputes arbitration.	I or electronic instruct y at any time refuse to es. (4) authorize you to ou may obtain such repor mer report has been obt pened in the title indicat	ions with the sam accept such instru obtain a consume rts. I also authoriz tained and will give ted on this card, a	e effect as if I had signed actions. (3) authorize you t or report in connection with e you to use these consume e me the name and address and (6) understand and ackn	them. (2)agree to follow you to record and monitor my tele th the application, update or r er reports to consider me for of the agency furnishing the lowledge that such account ag	r security procedures and to phone calls as evidence of my enewal of any loan or deposit other programs with Citibank. report. (5) agree to be bound preement provides that either
Signer 1 Signature			Signer 2 Signature		
Signer 3 Signature			Signer 4 Signature		
		ACCOUNT SIGN	ATURE CARD		cîti
DATE:	FIMP:				
Account Title:	·				
Account Number(s):					
PRINT SIGNER NAME 1	DATE:		PRINT SIGNER NAME 2		DATE:
Signature			Signature		
,					DATE
PRINT SIGNER NAME 3	DATE:		PRINT SIGNER NAME 4		DATE:
Signature			Signature		

Forward to signature certification unit