TRANQUILLITY Config Contract Name	KNO	Tra Hea	nqu i ad Off	fice: 7	Cre #5 Ma	dit Un araval F	i on Co Road, N : 868-	D-O lewt 628-	own 926	a tive , Port 6	Soci of Sp	ety ain,	Lim Trini	itec dad.	1	RM
			 	10@11	anqu	initycu.	<u>com</u> –	wet	site	. <u>vv vv v</u>	<u>w.uan</u>	<u>quini</u>	<u>tycu</u>		<u>L</u>	
Account #:																
Title: Mr. Ms. Mrs.	_			Statu	ıs: Sin	ngle	Married		Div	vorced		Commo	n-Law	,	Widov	ed 🗔
		1 1	I				I									
Full Name:																
Date of Birth (dd/mm/yy):/	/				Place	of Birth:										
Nationality:					Other (dual) (please specify):											
Resident: Yes No					If "No"	, state Cou	intry of R	esider	nce:							
Permanent Address:																
Mailing Address:																
Telephone Numbers: Home: (Telephone Numbers: Home: ()					Mobile: ()										
Email Address:																
Recommender:							Date:									
(Please note: Recommender must be a member in good sta					anding)											
B. VERIFICATION OF IDENTIT	Y AND AD	DRESS	(Certif	ied Tru	ie Cop	ies of th	e Origin	als m	ust b	e sub	mitted)					
ID Type (2 forms)	Number				Country of Issue Expiry Date (c						e (dd/m	m/yr)				
National ID						,						,	(4.4.)	j .)		
Driver's Permit											_					
Passport Address Verification: Litility Bill (Ele	otricity / M/a	tor / Tolon	hono / (Cable) [Current B	ank St	atom	ont 🗔			Cortifi	od Driv	or's Dor	nit 🗔
Address Verification: Utility Bill (Electricity / Water / Telephone / Cable)					Current Bank Statement Certified Driver's Permit Documents Attached: Yes No											
C. OCCUPATION DETAILS																
Classification: Private Sector	Public Se	ctor 🗌	Gove	ernment	Service	e 🗌 🛛 S	elf-Emplo	yed [Retired	1 🗌	Home	emake	r 🗌	Stude	ent 🗌
Occupation:					If Self-Employed or with side job, please complete:											
Employer:					Occupation:											
					Name of Business:											
Work Address:					Business Address:											
					Business Telephone Number: ()											
						VAT Registration Number (if applicable):										
Work Telephone Number: ()					Certificate of Incorporation (if applicable): Copy Attached: Yes No \$100,000 - \$200,000 \$200,000 - \$400,000 >\$400,000 >\$400,000 \$400,000 \$200,000											
Gross Annual Income Details: < \$5	0,000	\$50,0	00 - \$1	00,000 [\$100,0	00 - \$200	000		\$200,0	000 - \$40	0,000			>\$400,0	
							_	_	_			_	_	_		
D. POLITICALLY EXPOSED PE	RSONS (P															
Are you an INDIVII	DUAL, or th			-		o any of t or a CLO		-		OFESS	SIONAL	ASSO	OCIAT	ſ E of;		
Head of State or Government					Senior politician											
Senior government, Judicial or Military Officials					Senior executives of State-owned corporations											
Important political party officia	ls															
Are you or have you been entrusted v If YES, please provide details:	with a promi	nent funct	ion by a	an intern	ational	organisati	on - (UN, (DAS, I/	ADB, I	LO, CFA	ATF)					
Tranquillity Credit Union			Know	Your M	ember	Form		May	2022	2		Page	e 1 of 2	2		

Name and Address of Foreign Finan	cial Institution:						
	eign Bank Ref,. Letter	Telephone No.	of Foreign Financial Instit	ution: (
Q		dentification:	Other:	ution. ()			
				(FATCA)			
US Indi			cumentation Require		Documen	ts Attached	
IS Citizens or lawful permanent reside	ent 🗌	• W-9 or W-8	BEN		Yes 🗌	No 🗌	
JS Birthplace		establishing	EN sport or similar documenta foreign citizenship anation regarding US citize		Yes 🗌	No 🗌	
JS Address (residence and mailing)			EN sport or similar documenta foreign citizenship	ation	Yes 🗌	No 🗌	
nstruction to transfer funds to US acco eceived from a US address	ounts or directions regularly		W-9 or W-8BENDocumentary evidence establishing non-US status				
Dnly address on file is "in care of" or "h Notice of 2001-34 excludes foreign PC					No 🗌		
Power of Attorney or signatory authorit address	ty granted to person with US	W-9 or W-8E Documentar	EN y evidence establishing no	on-US status	Yes 🗌	No 🗌	
. DECLARATION							
ated this day of gnature of Member ame of Intermediary (if applicable) DR OFFICE USE ONLY riginals Verified eference List Checking: UN 2253	Signature of In Certified Document copi T & T Consolidated List o	termediary		Copies of docum	mp of the Inter (if applicable) ents received [
ndly indicate search result for the Individ Prepared by: Member Services		ed By: r Manager	Date (Approved by: Compliance Office	er	Date	
Prepared by:	Verifie		Date (er	Date	
Prepared by: Member Services	Verifi Date Supervisor		Date (Compliance Offic	er	Date	
Prepared by: Member Services	Verifi Date Supervisor	r Manager		Compliance Offic	er	Date	
Prepared by: Member Services sk Rating: LOW	Verific Date Supervisor	r Manager	High [Compliance Offic	er	Date	
Prepared by: Member Services sk Rating: LOW smarks (Attach sheet where necessary) Meaning of Politically Exposed Perse a) Individuals such as to owned corporations at is by ii. b) persons who are or such as directors and c) c) an immediate family	Verific Date Supervisor		High [PERSON r government, judicial or m entrusted with prominent fu national organisation which , IADB, ILO, CFATF) ent, siblings, children and c	ilitary officials, se notions – refers to member	nior executives s of senior man	of State- agement n, and	