Beneficial Ownership Information Form

All Persons opening an account on behalf of a legal entity must provide the following information:

Natural Person O	pening Account:								
Last Name: First Name: M.I Title:									
Name and type o	_								
Legal Entity Addr	ess:								
City	State:	Zip /	2						
= = = = = = = = = = = = = = = = = = =	tract arrangemen		ing, relation	nship, or otl	who, directly or indirect nerwise owns 25% or m bove	-			
Last Name:		First Name:			M.I:				
Date of Birth:	MM	DD	YEAR						
Address:				City:					
State:	Zip Code	Counti	ry:						
SSN:									
Last Name		First Name _			M.I				
Date of Birth:	MM	DD	YEAR						
Address:				City:					
State:	Zip Code: _	Cou	ntry:						
SSN:									
Last Name:		First Name:			M.I				
	MM								
Address:				City:	·				
		Country:							
SSN:									

Last Name		First Name			M.I
Date of Birth:	MM	DD	YEAR		
Address:				City:	
State:	Zip Code	Coi	untry:		
SSN:					

And we need the following:

- 1. Driver's License or Passport: A clear copy of either your driver's license or passport for identification purposes.
- 2. Articles of Organization: Please submit the Articles of Organization pertaining to your business structure.
- 3. Gross Sales as of 2023: Provide accurate figures for your business's gross sales as of the current year, 2023.