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**Organization Account Questionnaire** 

## For Corporations, LLCs, Partnerships and Charitable Organizations

Federal regulations require SSG to assist the federal government in efforts to fight money laundering and other financial crimes. Please provide the information below to identify the entity as well as the Authorized Individuals, Control Persons, and Beneficial Owners. We may require additional documentation.

Name of Organizati	ion (as shown	on the charter or ot	her legal document creat	ing the corp	oration)	
Country of Incorporation			State of Incorporation	Date of	of Incorporation	n (mm/dd/yyyy)
Organization's web	site URL Add	lress				
Organization's prin						
activity						
Products or services	s that the Orga	anization provides				
Name of your prima	ary regulator					
Purpose of this acco	ount					
the organization to sign contracts, we SSG will have no respect to, any tra	that is authoralized aivers, or reaction or one or one or	orized to buy and eleases, and other of further inquinstruction prov	each individual directly sell securities, with erwise conduct busing uiry with respect to rided by an Authorized	draw or to ess on be the valided Individ	ransfer cash half of the City of, or au ual.	or securities, Organization. orthority with
Name	Title	Address			SSN	%Ownership
Name		Country of	icate the name of the citizenship	e person a	and country	of citizenship.
-	this section nsibility for	for each owner	of 25% or more, all organization), and ar			
Name	Title	Address		SSN/TIN	% Ow ship	ner-Control Person Y/N
			icate the name of the fcitizenship			
Check here if a publicly traded	any person a company.	above is a director	d with a broker-dealer, 10% shareholder, following information	senior of	ficer or conti	rol person of
Name		Company Name			Stock Symbol	
Company Address			City		State_	ZIP

<u>Identification of Authorized Individuals(s)</u> Provide copy of a Driver's License or Passport for each beneficial owner and each person authorized to conduct business for the organization.

A minimum of two signatures of corporate officers are required to open an account. One signature must be from the Chairman of the Board, CEO, President, or any Vice President; the second signature must be from the Secretary, any Assistant Secretary, the Chief Financial Officer, the Treasurer, or any Assistant Treasurer.

I hereby certify to the best of my and correct.	knowledge that the information provide	ed above is complete		
Print Name				
Authorized Signature	Date	Date		
I hereby certify to the best of my land correct.	knowledge that the information provide	ed above is complete		
Print Name	Title			
	 Date			