



Client Identification Verification

The purpose of this form is to collect information which securities dealers are required by law to obtain under the Proceeds of Crime (Money Laundering) and Terrorist Financing Act and by the By-laws, Regulations and Rules of the self-regulatory organizations governing securities dealers when opening an account.

<input type="checkbox"/> Government-Issued Photo Identification Method		
Full name as it appears on ID		
Type of ID	ID number	
Issuing Jurisdiction/Entity/Authority	ID Place of issue (jurisdiction)	Issuing Country
Date of issue (if applicable) (mm/dd/yyyy)	Expiry date (mm/dd/yyyy)	Verification date (mm/dd/yyyy)
<input type="checkbox"/> Credit File Method		
Client name	Source of credit file (i.e. Equifax)	
Credit file reference number	Verification date (mm/dd/yyyy)	
<input type="checkbox"/> Dual Process Method		
Client name		
1. Name of source documentation/information	Type of information (example: bank statement, CRA Assessment Notice)	
Reliable source of information account / reference number	Verification date (mm/dd/yyyy)	
2. Name of source documentation/information	Type of information (example: bank statement, CRA Assessment Notice)	
Reliable source of information account / reference number	Verification date (mm/dd/yyyy)	
<input type="checkbox"/> Agent/Entity/Mandatar*^y		
Client name		
Full name of entity/agent/mandatar* ^y		
Client identification method used	Date of verification by entity/agent/mandatar* ^y (mm/dd/yyyy)	
Information gathered by the entity	Verification date (mm/dd/yyyy)	

* An entity is a domestic or foreign affiliate of your entity, or a financial entity that is a member of your financial services cooperative or credit union central. If client identification was conducted by an agent or mandatar*^y, you must maintain a copy of the agreement

NOTE TO DEALERS AND FINANCIAL ADVISORS

This form is provided as a courtesy only and B2B Bank Financial Services Inc., B2B Bank Securities Services Inc. and B2B Bank Intermediary Services Inc. make no representations or warranties that this form or its use satisfies the requirements of the Proceeds of Crime (Money Laundering) and Terrorist Financing Act. It is recommended that this form only be used with the prior approval of your Compliance Department.

Dealer Use

Received, reviewed and complete.

Date (mm/dd/yyyy)

Name of Individual completing review

Signature