

Beneficial Owner Form

Internal Use Only: Account ID _____

4. BENEFICIAL OWNER INFORMATION

Mr. Mrs. Ms.

Miss. Dr.

Beneficial Owner (First, Initial, Last)

% Ownership

SIN

Address (PO Box & General delivery not acceptable) must include city, province and postal code.

Home Phone

Mailing Address (If different from above) must include city, province and postal code.

Business Phone

Citizenship (List all countries)

Email Address

Cellular Phone

1. **Primary Identification:** A Beneficial Owner must include a legible photocopy of valid government issued photo ID and select from the Verified Identification Methods below:

Passport Driver's License (front & back)

2. **Supporting Identification:** A Beneficial Owner must include a legible copy of a valid ID issued by a financial or government entity and select from the Verified Identification Methods below:

Credit Card (front & back) Health Card (front & back)

Other ID Type & Number

_____ (Acceptable ID must have Unique identifier, Signature and Expiry Date) and be issued by a Government or Financial Institution.)

** If Passport was selected for Primary, you may select Driver's License as the Supporting piece.

3. A recent utility or bank statement that is a direct download (PDF or XLS format) no older than 3 months.

I represent and warrant that the information provided herein is accurate and complete and that I have read and understood the terms and conditions of Einstein's User Agreement governing the Entity's account.

I consent

I do not consent

X _____
Beneficial Owner Signature

Date (dd/mm/yyyy)