

To all potential partners.
Kindly requested to fill in the form below.

QUESTIONNAIRE 2.

1. THE COMPANY

Full name of the Company:	
Short title:	
Country under whose law the company has been registered:	
Legal form:	
Registered number:	
Tax number:	
Registration date:	
Company registered address:	
Company business (physical) address (if any):	
Company website:	
Contact person:	
Telephone in resident country:	
Email:	

2. COMPANY AUTHORIZED REPRESENTATIVE

MANAGER:

First name,Last name:	
Passport number:	
Issued by:	
Address:	
Personal identification number:	

AUTHORISED PERSON:

First name,Last name:	
Passport number:	
Issued by:	
Address:	
Personal identification number:	

AUTHORISED PERSON FOR OPENING ACCOUNT OF THE COMPANY,ON THE POSITION OF () IN THE COMPANY:

First name,Last name:	
Passport number:	
Issued by:	
Address:	
Personal identification number:	

CONTACT PERSON:

First name,Last name:	
Phone:	
E-mail:	

3. COMPANY PARTICIPANTS INFORMATION

3.1. PARTICIPANTS – NATURAL PERSONS,OWNERS OF SHARES INDIVIDUALS WITH SHARE EQUAL OR HIGHER THAN 20% OF THE CAPITAL (THE BELOW MUST BE FILLED IN AND PROVIDED IN AS MANY SPECIMENS AS THERE ARE PARTICIPANTS NATURAL PERSONS)

First name,Last name:	
Passport number:	
Issued by:	
Nationality:	
Share number in company, %	
E-mail:	

First name,Last name:	
Passport number:	
Issued by:	
Nationality:	
Share number in company, %	
E-mail:	

First name,Last name:	
Passport number:	
Issued by:	
Nationality:	
Share number in company, %	
E-mail:	

3.2. PARTICIPANTS – LEGAL ENTITIES,CAPITAL RELATED ORGANIZATIONS/LEGAL ENTITIES WITH SHARE EQUAL OR HIGHER THAN 20% OF THE CAPITAL (THE BELOW MUST BE FILLED IN AND PROVIDED IN AS MANY SPECIMENS AS THERE ARE PARTICIPANTS LEGAL ENTITIES)

Full name of the Company:	
Country under whose law the company has been registered:	
Legal form:	

Registered number:	
Tax number:	
Registration date:	
Company registered address:	
Share number in company,%	

Full name of the Company:	
Country under whose law the company has been registered:	
Legal form:	
Registered number:	
Tax number:	
Registration date:	
Company registered address:	
Share number in company,%	

4. STATEMENT FOR BENEFICIAL OWNERS

THE BELOW MUST BE FILLED IN AND PROVIDED IN AS MANY SPECIMENS AS THERE ARE ULTIMATE BENEFICIAL OWNERS.

(BENEFICIAL OWNER OF A LEGAL ENTITY IS A PRIVATE INDIVIDUAL WHO ACCOMPLISHES DIRECT OR INDIRECT PARTICIPATION OF AT LEAST 25% OF THE TOTAL SHARES I.E. VOTING RIGHTS OF THE LEGAL ENTITY, INCLUDING POSSESSION OF TRANSFERABLE SHARES AND/OR WHO OTHERWISE ESTABLISHES CONTROL OVER THE MANAGEMENT AND ACHIEVES BENEFIT WITH THE LEGAL ENTITY)

First name(s) and Surname	
Address:	
Passport number:	
Personal identification number	

5. LICENSE DETAILS

DECISION BY A SPECIAL REGISTERING INSTITUTION FOR A LICENSE FOR CERTAIN ACTIVITIES OR A LICENSE (EXCHANGING OPERATIONS, LEASING, GAMES OF CHANCE, INSURANCE, FAST MONEY TRANSFER) (IN CASE THE LEGAL ENTITY REQUIRES A SPECIAL LICENSE/LICENSE ACCORDING TO THE POSITIVE LEGAL REGULATION)

- YES
 NO

LICENSE NO.	DATE OF ISSUANCE OF THE LICENCE/ PERMISSION	PRINCIPAL ACTIVITY	CODE OF ACTIVITY

6. CIRCLE THE NUMBER OF ACTIVITY

- | | |
|--------------------------|-----------------------------------|
| 1. PUBLIC ADMINISTRATION | 12. ATTORNEY-AT LAW |
| 2. EDUCATION | 13. NOTARY |
| 3. HEALTH CARE | 14. BAILIFFS |
| 4. TRADE | 15. TOURIST AND CATERING INDUSTRY |

- 5.FINANCIAL AGENCIES AND BANKS
- 6.ACCOUNTING,INFORMATION TECHNOLOGIES AND TELECOMMUNICATION
- 7.INDUSTRY AND CONSTRUCTION
- 8.TRANSPORT
- 9. SPORT,ART AND CULTURE
- 10.OWNER OF A COMPANY/BUSINESS
- 11.AGRICULTURE

- 16.ECONOMIC AND LEGAL CONSULTING
- 17.NON-GOVERNMENT ORGANIZATIONS
- 18.INTERNATIONAL ORGANIZATIONS
- 19.CASINOS,SPORTS BETTING HOUSES, GAMES OF CHANCE
- 20.INDEPENDENT
- 21.OTHER_____

7. TYPE OF CLIENT(CIRCLE THE NUMBER OF ACTIVITY)

- 1. SOLE PROPRIETORSHIP LIMITED LIABILITY COMPANY
- 2.LIMITED LIABILITY COMPANY
- 3.JOINT-STOCK COMPANY
- 4.PUBLIC COMPANY
- 5.STATE OWNED COMPANY
- 6.ASSOCIATION OF CITIZENS
- 7.SOLE PROPRIETOR
- 8.OTHER_____

8. SIZE OF SOMpany/LEGAL ENTITY

- 1.MICRO
- 2.SMALL
- 3.MEDIUM
- 4.LARGE
- 5.EMPLOYEES NUMBER_____ (CURRENT NUMBER)

9.IS THE COMPANY CURRENTLY ACTIVE?

- YES
- NO

10. DOES THE COMPANY HAVE AN ACCOUNT? IF SO, PLEASE INDICATE IN WHICH BANKS AND IN WHICH COUNTRIES

11. TOTAL ANNUAL TURNOVER ACCORDING TO THE LAST FINANCIAL STATEMENT (IN EUR)

12. BANK PRODUCTS/SERVICES TO BE USED

- 1. LOCAL CURRENCY ACCOUNT
- 2. FOREIGN CURRENCY ACCOUNT
- 3. LETTER OF CREDIT
- 4. DEBIT BUSINESS CARD

5. E-BANKING

6. OTHER _____

13. EXPECTED BUSINESS RELATIONSHIP WITH CLIENTS FROM THE FOLLOWING COUNTRIES:

1.MACEDONIA

7.PAKISTAN

13.CAYMAN ISLANDS

2.USA

8,UZBEKISTAN

14.BRITISH VIRGIN ISLANDS

3.CANADA

9.TURKMENISTAN

15.PANAMA

4.EU

10.BAHAMAS

16.CHINA

5.AUSTRALIA

11.BERMUDA

17.OTHER _____

6.IRAN

12.GIBRALTAR

14. EXPECTED ANNUAL TURNOVER ON THE ACCOUNT IN THE BANK(IN EUR)

1.UP TO 500.000 EUR

3.FROM 2.000.000. TO 5.000.000 EUR

2.FROM 500.000 TO 2.000.000 EUR

4.ABOVE 5.000.000 EUR

SIGNATURE

Place and Date:

Signature: