

POLITICALLY EXPOSED PERSON (PEP) DECLARATION FORM

The information in this form is collected in order to comply with the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001 (AMLATFPUAA) requirements.

1 DEFINITION OF POLITICALLY EXPOSED PERSON

A politically exposed person (PEP) is an individual who is or who has been entrusted with prominent public functions domestically or by a foreign country.

Prominent public functions include the following profiles:

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| 1. Head of State or of Government | 2. Senior politician |
| 3. Senior government, judicial or military official | 4. Member of ruling royal family |
| 5. Senior executive of state owned corporation / government linked company | 6. Important political party official |

The definition of PEP also includes immediate family members, relatives, adviser, personal adviser or business associate of an individual stated above.

2 DETAILS OF THE POLITICALLY EXPOSED PERSON

	First Applicant	Joint Applicant
1. Are you a PEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you related to a PEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. If you are or related to a PEP, please indicate the profile: 3.1 Head of State or of Government 3.2 Senior politician 3.3 Senior government, judicial or military official 3.4 Member of ruling royal family 3.5 Senior executive of state owned corporation / government linked company 3.6 Important political party official	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4. If you are related to a PEP, please indicate their relationship to you:	<input type="checkbox"/> Family <input type="checkbox"/> Relatives <input type="checkbox"/> Adviser <input type="checkbox"/> Business Associates <input type="checkbox"/> Others, please specify _____	<input type="checkbox"/> Family <input type="checkbox"/> Relatives <input type="checkbox"/> Adviser <input type="checkbox"/> Business Associates <input type="checkbox"/> Others, please specify _____

3 DECLARATIONS AND SIGNATURES

- | | |
|--|---|
| 1. I/We declare that all the above information given by me is true and accurate, and that I/we have not withheld any material facts or information from BOS Wealth Management Malaysia Berhad (BOSWMM MY). | 2. I/We undertake to furnish BOSWMM MY with additional information as BOSWMM MY may require at any time and also undertake to update BOSWMM MY of any changes with regard to the information stated herein. |
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Signature of First Applicant

Name of First Applicant

NRIC/Passport No.

Date

Signature of Joint Applicant

Name of Joint Applicant

NRIC/Passport No.

Date

FOR OFFICE USE ONLY

Remarks	Verified By	Date	Received Date Stamp
	Processed By	Date	