

DATE: _____ DAY _____ MONTH _____ YEAR _____

I. GENERAL INFORMATION

COMPANY NAME		COMPANY ID NUMBER according country of residence (e.g. Tax ID, TIN, Business Certificate, NIF, or RUC)	
ADDRESS			
COUNTRY		TELEPHONE NUMBER	
ZIP		EMAIL	
LEGAL REPRESENTATIVE NAME		ID No	
CONTACT PERSON		MOBILE NUMBER	
		EMAIL	

II. BANKING INFORMATION

BANK'S NAME	
ACCOUNT NUMBER	
INTERMEDIARY BANK	
BANK ADDRESS	
No ABA / SWIFT	

III. ADDITIONAL DOCUMENTATION

Please send copy of the following information according to apply, with this form

1. BUSINESS CERTIFICATE (e.g W9 FORMAT OR EQUIVALENT)
2. LAST AUDITED FINANCIAL REPORTS
3. BANKING INFORMATION CERTIFICATION
4. IF APPLICABLE, CREDIT RISK RATING (S&P or MOODYS)
5. FISCAL RESIDENCE CERTIFICATE

N/A	Yes	Not

IV. Prevention Statement of Money Laundering Activities and Terrorism Financing (AML / CFT)

Acting on my own behalf and on behalf of the legal entity I represent, I hereby make the following statements:

1. That my resources and the resources of the company I represent are originated from legal activities.
2. That we have not made any transactions or operations consisting in the execution or intended for illicit activities or in behalf of people who execute or are directly or indirectly related to the execution of such activities.
3. We do not hire or have links whatsoever with third parties that perform operations or whose resources come from illegal activities and undermine national and foreign regulations that have application in the relationship generated between the parties or any legislation that replace or modify the actual. Likewise I declare that I know **CSP DE COLOMBIA LTDA.**, policies and that neither I nor the company I represent undertakes any behavior that goes against that policies.
4. That the company I represent complies with the rules on prevention and control of money laundering and terrorist financing (ML/TF) that may be applicable.
5. That neither I nor the company I represent, nor its shareholders or board members, associates or partners, are registered in the international lists of persons outside the law
6. That there are not ongoing or pending investigations or prosecutions for fraud against me or the company I represent nor its shareholders or board members, associates or partners.
7. In the event that I have knowledge of any of the circumstances described in the preceding two paragraphs, I agree to immediately notify **CSP DE COLOMBIA LTDA.**, to the e-mail **eticaytransparencia@csdirect.com.co**
8. That by signing this document we authorize **CSP DE COLOMBIA LTDA.**, to make reports to the competent authorities, as it considers appropriate in accordance with its regulations and manuals related to the system of risk management of money laundering and terrorist financing, relieving it of any responsibility.
9. That I am not aware of any other natural or legal entity having illicit interest in the signing of this contract.
10. I declare that the payments made by the company that I represent on the execution of the business relationship shall be effected directly and with the company own resources and not through third parties or third-party resources.
11. That the company I represent, its employees, shareholders, board members and/or officers have not been linked to any investigation, or punished for violating rules related to money laundering and/or terrorist financing.

V. POLITICALLY EXPOSED PERSON (PEPS) - (ONLY DILIGENCE FOR PEOPLE)

For your position or activity do you manage public resources?	YES _____ NO _____
For your position or activity do you exercise any degree of public power?	YES _____ NO _____
For your activity or trade, do you enjoy general public recognition?	YES _____ NO _____
Is there a relationship between you and a person considered politically exposed?	YES _____ NO _____

VI. PERSONAL DATA PROTECTION

As Legal Representative, I authorize to CSP DE COLOMBIA LTDA., (THE COMPANY) or those who delegate them, or whoever represents their rights, or whoever in the future stops their contractual position to treat, consult, request, supply, report, process, obtain, modify, employ, send, analyze, store, use, circulate, delete and study my personal data, as well as all the information that refers to me credit, financial, commercial and service behavior directly or through third parties in charge or responsible for the same purposes of this authorization, inside and outside the national territory.

This authorization implies that the behavior towards my obligations will be recorded in order to provide sufficient and adequate information to the credit bureaus or entities in charge about the status of my financial, commercial and credit obligations. Likewise, this authorization may be used for statistical or historical purposes and those provided by law.

I declare that my rights to know, update, rectify and delete, my obligations, as well as the permanence of my information in the databases, corresponds to what is determined by the personal data treatment policies of THE COMPANY that I declare to have read in the pages www.CSPgroup.com, the applicable legal system and what is contractually determined with these companies.

I authorize to CSP DE COLOMBIA LTDA. (THE COMPANY) to share my information to other national or foreign managers or managers of personal data, in the terms established by law, as long as the treatment and purposes are the same or similar to here established.

In addition to the foregoing, this authorization by virtue of Law 1581 of 2012, empowers to CSP DE COLOMBIA LTDA., (THE COMPANY) that my personal data and the general the information obtained by virtue of the link established or that will be established may be subject to treatment. manual or automated with the following purposes:

1. Supplier management
2. Verify compliance with the agreements and commitments assumed by virtue of the relationship or existing link with suppliers
3. Present complaints, reports or reports to the competent authorities or entities in case of breach of contracts
4. Collect data for the fulfillment of the duties that, as Responsible for the information and personal data, corresponds to the Company
5. For security or fraud prevention purposes
6. Execution of the contract signed with the Companies
7. Carry out operational risk measurement processes and in particular process my information for the purpose of preventing money laundering and terrorist financing activities
8. Please the legitimate interests derived from the relationship established
9. manage and operate the product or service contracted, which includes, among other aspects, the management and accounting record of the operations that take place during the life of the contract, as well as all those that are carried out for the termination, closing or liquidation of the same
10. Send commercial information about the products and / or services that the company provides in development of its corporate purpose through the channels that it establishes, such as the telephone channel and electronic communication means.

In the same way, accomplish with the internal processes of CSP DE COLOMBIA LTDA., (THE COMPANY) related to administration of suppliers and contractors, as well as Processing the requests of suppliers, I authorize that the above purposes and / or treatments can be carried out directly by CSP DE COLOMBIA LTDA., (THE COMPANY) or through third party managers.

Signing this document, I declare that I have read, understood and accepted the agreement, authorizing the treatment of the data provided by natural persons and Legal Representatives of legal entities. I certify that the information provided in this document is true and that, having read, understood, and accepted the foregoing.

LEGAL REPRESENTATIVE OF COMPANY	CSP AUTHORIZED EMPLOYEE
Acting on behalf of the company I represents and on my own behalf, I declare that everything included in this document is the true.	MARKETING _____
SIGNATURE _____	TREASURY _____
NAME _____	DATE OF DELIVERY _____
ID No. _____	CLIENT CODE _____

VII. CERTIFICATE OF SHAREHOLDER PARTICIPATION

THIS INFORMATION IS REQUESTED TO COMPLY WITH CURRENT COLOMBIAN REGULATIONS RELATED WITH AML / CFT

Please, mark with an "X" if, according to the type of company, the ENTITY DOES NOT have partners or shareholder _____
(For example if it is: A non-profit organization, Foundation, etc)

Otherwise, fill out one of the following information:

ASSOCIATES, SHAREHOLDERS OR PARTNERS WHO HAVE PARTICIPATION IN THE SHAREHOLDERS CAPITAL

A. I certify that the associates, shareholders or partners that have participation in the company that I represent are:

NAME OF SHAREHOLDER, PARTNER OR ASSOCIATE	IDENTIFICATION NUMBER	NUMBER OF SHARES, QUOTAS OR PARTS OF INTEREST	PARTICIPATION IN THE SHAREHOLDER CAPITAL (%)

*** Note: If these lines are NOT sufficient to register shareholders, please attach a separate document with complete information*

IF ONE OF THE SHAREHOLDERS, ASSOCIATES OR PARTNERS IS A COMPANY, LIST THE FINAL BENEFICIARIES (NATURAL PERSONS) TOGETHER WITH THE INTERMEDIARY ENTITIES OR PERSONS THAT INTERVENE.

B. I certify that the real and controlling beneficiaries (1) of the entity that I represent are the following natural persons:

Name	Identification Number

IF ONE OF THE SHAREHOLDERS, ASSOCIATES OR PARTNERS IS A COMPANY THAT IS TRADED ON THE STOCK EXCHANGE, PLEASE MENTION IT BELOW

I certify that the HEADQUARTES _____ that registers as a shareholder or contractor of the entity that I represent, is traded on the stock exchange of _____

Company name: _____

ID. Company: _____

CEO, President: _____

ID CEO Presidente: _____

**Signature CEO,
President:** _____

[1] "Real beneficiary" or "Controlling person" refers to any person or group of people that, direct o indirectly, through a contract or an agreement or through any other vehicle, has or may have in respect to a share, quota or part of interest of a company, decision making power or the control of the company.