

Dear customer,

Please carefully read the content of the following form and fill out the required information.

Once completed, please upload the document (scanned or digitally signed) through any of the upload fields available in the 'Verify your account' page on your Coinmama account.

1. Service Applicant Declaration Form

I, the undersigned,	Your <u>full</u> name – includ	ding any middle name(s,	, holder of the Identification			
	Your Identification		palid (preferably, an international passport) sport o Driving License o National ID Card			
Document indicated here:	Type of document:	o Residence Permit				
	Country of issue:					
	Document number:					
	National Identification	Number: [where applical	ble]			
from Street, house number, a		omplete address of resion	dence ———————————————————————————————————			
City:	number, apt.: ZIP code:					
State / province:		Country:	Zir coue.			
State / province.	State / province.					
hereby declare that: [mark your choice]						
O A. I wish to receive the currency conversion service for myself only.						
○ B. I wish to receive the currency conversion service on behalf of another person/corporation:						
	t(s) of the service:					
only if 'B'	•	•	nent from the recipient of the service,			
is marked		•	cipient is a corporation, the authorized its holders of controlling interests.			
		,,				

The type of the requested services (as specified in Prohibition of Money Laundering Law, 5760-2000, paragraph 11C. (a) is: **Delivery of financial assets against currency.**

I undertake to inform the provider of currency services in writing as soon as possible of any change in the details noted above and sign a renewed declaration if the said details were changed, including acting on behalf of another service recipient.

I am aware that providing false information, including the failure to deliver an update of details required to be delivered, in order to avoid the filing of reports or filing an incorrect report under Section 7 of the Prohibition of Money Laundering Law is a criminal offense.

Date:	Signature:



2. Know Your Customer Questionnaire

Full name:				E-mail address:			
Date of birth:	Nationality:		:		Phone number:		
		Informatio	n abo	out your estimate	d activity		
Estimated amount of intended activity: The amount of money with which you intend to buy Virtual Currency from Coinmama in the upcoming 12 months (in USD).		0 :					
The reason you intend to	f buying Virtual Currency: you buy Virtual Currency; how to use the Virtual Currency rom Coinmama.		0 0 0 0	party (specify which): Short-term trading on digital exchange(s) (specify which): Online gambling Investing in an ICO (specify which): Buying goods (please specify):			
intend to bu	the funds with which you buy Virtual currency: stained the money with which you Virtual Currency from Coinmama.		 Work salary Inheritance Private savings Loan (granted by:				
	Infor						
Employmer	nt status	o Employee o Homemake o Retired			loyed o	Student Soldier 	
Monthly income (your monthly income in US0\$0 - \$2,000dollars)0\$5,000 - \$10				2,000 – \$5,000 bove \$10,000			
Profession and job title or position (e.g. legal secretary, taxi driver, bank clerk, software engineer - IT manager, accountant - CFO, etc.)					er,		
Field of activity of employing company or own business (e.g. law firm, insurance company, telecommunication company etc.)							
Name of employing company or own business (e.g. Coinmama)							
URL to the website of employing company or own business (e.g. www.coinmama.com) [where applicable]							

I certify that the information provided in this questionnaire is true and complete. I understand that the provider of currency services will rely on the provided information. I also understand that any provision of false information and/or wilful or negligent provision of inaccurate information may constitute the termination of our relationship.

I authorize the provider of currency services to make inquiries it may deem necessary or appropriate in order to determine suitability for a business relationship. I undertake to actively inform the provider of currency services, in writing, as soon as possible, of any change in the details noted above, as well as to complete and sign a renewed questionnaire in the event of such changes.

Date:	Signature:
	516114141 CT