

KNOW YOUR CLIENT (KYC) UPDATE FORM – LEGAL ENTITY

Investor Details

Legal Entity Name		Client No.	
Business Address			
Contact Person Name & Surname			
Cell no			
E-mail Address			

Source of Income

Please select and complete all the applicable Source of Income fields below.	
Source of Income Type	Amount (monthly)
<input type="checkbox"/> Business Income/ Company Profits	N\$
<input type="checkbox"/> Shares Sold	N\$
<input type="checkbox"/> Rental Income	N\$
<input type="checkbox"/> Dividends	N\$
<input type="checkbox"/> Investments	N\$
<input type="checkbox"/> Donations	N\$
<input type="checkbox"/> Other ⁴	N\$
⁴ Please specify	
Total Source of Income	N\$

Investor Declaration

I, herewith declare that all information provided above by me is true and correct. I acknowledge that the Administrator (Capricorn Asset Management) may report any information provided by me to the Financial Intelligence Centre.

Signature of Investor/Financial Advisor _____ Signed at _____ Date _____