



Account / Client Information Update Form

Universal Client Number Assigned.....

This form is to be used to make updates to Account and/or Client Information for JMMB Group clients. A separate form MUST be completed by each client whose information is to be updated. Please check the appropriate box(es) and indicate the update(s) which are being requested.

To update client details, the following documentation may be required:

- 1. 1 valid identification (Driver's License or Passport or National ID/Resident/Citizenship Card + Birth/Adoption Certificate)
2. 2 References from any of the following (only 1 internal reference is allowed): Notary Public/Justice of the Peace, Police Officer at or above the rank of Inspector, Minister of Religion, Lawyer, Medical Doctor, Chartered Accountant, Current Employer, Banker's reference, JMMB Group client of over two years, JMMB Team Member of over a year. Immediate family members cannot provide a reference.
2. Tax Registration Number or Foreign Equivalent
3. Proof of Residential Address (Must have YOUR name and YOUR residential address on it and must not be older than 3 months)
4. Source of Funds
5. Minors (under the age of 18 years old) will be required to provide one (1) picture identification (Driver's License, Passport, Resident Card) or a notarized picture and their birth certificate.

CURRENT PERSONAL INFORMATION (as stated on Account(s))

Client Name (as stated on Account(s)) (Title) (First) (Middle) (Last)

Date of Birth (dd/mm/yyyy) (as stated on Account(s)) TRN (as stated on Account(s))

UPDATE PERSONAL INFORMATION

Client Name Change

If your name is incomplete, spelt incorrectly in our database or has changed, e.g. by marriage/deed poll, please print as it should appear on your client record and provide proof of the change.

Title (Mr., Miss, Etc.) Full Name (First) (Middle) (Last)

Marital Status Single Married Separated Common Law Divorced Widowed

Client Signature Kindly indicate new signature on this line

Email Address (1) (2) Additional Replacement

Telephone No - (H) (W) (M) Fax

Mailing OR Residential Address (for residential address changes please provide current proof of address - no older than 3 months)

Parish/City State Zip Code Country

Politically Exposed Persons (PEP): Are you or any of your immediate family members (spouse*, child, step & adopted child, parents, siblings, child's spouse*) or their close business associates a current or former Head of State, Head of Government, member of any House of Parliament, Minister of Government, member of the judiciary, military official above the rank of Captain, member of police above the rank of Assistant Commissioner, Permanent Secretary or Chief Technical Director in charge of a Government department/ministry/executive agency/ statutory body, official of any political party &/or director or CEO of any company owned by your country of residence or a foreign government?

No Yes If Yes in what capacity? * including common-law

Are you acting as a trustee for another in relation to the business relationship or any one-off transaction? Yes No

Employment Status (select one) Full Time Part Time Retired Self Employed Student Unemployed Minor

Industry Occupation/Profession

Self Employed Yes No Trading As Name (if Applicable)

Employer's Name

Employer's Address

Parish/City State Zip Code Country

REFERENCE INFORMATION

Name of Referee 1	Contact Number	Reference Capacity (**Please note acceptable references stated above)	Years known to Referee	Is the individual known to the referee personally?
			<input type="checkbox"/> 1-5 Years <input type="checkbox"/> > 5 Years	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> 1-5 Years <input type="checkbox"/> > 5 Years	<input type="checkbox"/> Yes <input type="checkbox"/> No

UPDATE ACCOUNT INFORMATION

Add New Client(s) to Account

State FULL name of client(s) to be added and the account(s) to which they are to be added. Ensure each new client signs in the space below. Each new client must complete a Client Information Form and provide documents required as per AML/KYC Regulations.

	Name(s) to be Added <small>(enter title, first, middle & last name)</small>	Add to Account(s)	Signing Instructions	Client Being Added
				DOB (dd/mm/yyyy)/TRN
1			<input type="checkbox"/> Any One to Sign <input type="checkbox"/> Any Two to Sign <input type="checkbox"/> All to Sign <input type="checkbox"/> Special Instructions	DOB TRN
2			<input type="checkbox"/> Any One to Sign <input type="checkbox"/> Any Two to Sign <input type="checkbox"/> All to Sign <input type="checkbox"/> Special Instructions	DOB TRN
3			<input type="checkbox"/> Any One to Sign <input type="checkbox"/> Any Two to Sign <input type="checkbox"/> All to Sign <input type="checkbox"/> Special Instructions	DOB TRN

Client's Name

Client's Signature

Date (DD/MM/YYYY)

Client's Name

Client's Signature

Date (DD/MM/YYYY)

Client's Name

Client's Signature

Date (DD/MM/YYYY)

ELECTRONIC INDEMNITY (FOR JMJB BANK (JAMAICA) LTD. CLIENTS ONLY)

I/We hereby authorise JMJB Bank (Jamaica) Limited to act on any instructions, which are received by JMJB Bank (Jamaica) Limited by any of the methods approved by me below. By signing to any of the methods (below) I/we agree to be bound by the terms of use outlined in the remainder of this document as applicable to that method of transmission of instructions approved by me below.

METHOD OF TRANSMISSION OF INSTRUCTIONS

- FACSIMILE (FAX)
 EMAIL
 VERBAL (ORAL INSTRUCTIONS VIA THE TELEPHONE THROUGH THE CALL CENTRE ONLY)

This agreement is on the transmission from me/us regarding my/our account(s) held with your institution, subject always to such Fax, E-mail or verbal instructions approved by me, and received from me by such method(s) of transmission approved by me /us above, and being duly provided in accordance with the signing authority given to JMJB Bank (Jamaica) Limited by me/us.

In consideration of JMJB Bank (Jamaica) Limited, any of its officers, agents or otherwise acting in accordance with my/our instructions regarding my/our account(s) with you, via Fax, or E-mail or Verbally and provided that such instruction was received by any transmission method(s) approved above via I/we agree:

- that JMJB Bank (Jamaica) Limited may accept and act on any Fax and or E-mail and or Verbal instructions sent by me/us from time to time and I/we voluntarily and with full knowledge take and assume any and all risks associated with such request(s);
- that whenever Fax and or E-mail and or verbal instructions are received by JMJB Bank (Jamaica) Limited and purportedly sent by the authorized signers on an account (subject to specific signing instructions on the account, instructions from one (1) authorized signer will suffice) provided that one or all of the signers have signed to this agreement, JMJB Bank Limited shall have no obligation to check or verify the authenticity or accuracy of such Fax, and or E-mail and or Verbal instructions and may act on these instructions as if same had been duly provided in writing under the signature of me/us or given by me/us in person at one of your offices;
- to irrevocably authorize JMJB Bank (Jamaica) Limited to execute the transaction from my/our account(s) held with You immediately on receipt of the first Fax, E-mail or Verbal instructions regarding the transaction, and to debit my/our account(s) with all sums of money whatsoever, interest on money, costs, charges and expenses which the Bank may incur as a result of its complying with such Fax and or E-mail and or Verbal instructions. JMJB Bank (Jamaica) Limited will not be held liable for subsequent Fax, E-mail or Verbal instructions to not proceed with the initial request **nor will JMJB Bank (Jamaica) Limited**

be liable for a duplication of the transaction based on the customer following up the E-mail or Fax with subsequent written instructions (for the same transaction) bearing original signatures. JMMB Bank (Jamaica) Limited in line with good customer service will endeavor to assist me/us to rectify, however JMMB Bank (Jamaica) Limited is not obligated to do so. Transactions involving a third party are at the sole discretion of that party to assist in rectifying.

4. that in acting on such Fax and or E-mail and or Verbal instructions, JMMB (Jamaica) Bank Limited will at all times be deemed to have acted properly in executing such transactions/instructions and to have completely performed all obligations owed to me/us, notwithstanding that such Fax and or E-mail and or Verbal instructions received by JMMB Bank (Jamaica) Limited purportedly from me/us may have been initiated or communicated in error or fraudulently and I/we shall at all times be bound by any instructions received by JMMB Bank (Jamaica) Limited and purportedly sent by me/us from time to time on which time JMMB Bank (Jamaica) Limited may act if JMMB Bank (Jamaica) Limited in good faith and in exercising the necessary duty of care believed that the instructions received by Fax and or E-mail and or Verbal instructions were authentic instructions from me/us;
5. that JMMB Bank (Jamaica) Limited reserves the right not to act on instructions received in whole or in part via Fax and or E-mail and or Verbal instructions, if JMMB Bank (Jamaica) Limited believes that such instructions were fraudulently provided and or may put the transaction on hold until it has carried out further investigation into the genuineness of the instructions. JMMB Bank (Jamaica) Limited shall in no event or circumstances be held liable in any respect for any costs or losses suffered from declining the transaction or putting the transaction on hold;
6. that notwithstanding the above, JMMB Bank (Jamaica) Limited is not obligated to carry out such further investigation, and provided it has exercised due care may proceed with the transaction and shall in no event or circumstances be held liable in any respect for any costs or losses suffered from proceeding with the transaction;
7. to indemnify JMMB Bank (Jamaica) Limited, its officers, subsidiaries, agent and assigns and to keep JMMB Bank (Jamaica) Limited and its affiliates (as mentioned) indemnified against all actions, proceedings, liabilities, claims, damages, costs, losses and expenses in relation to JMMB Bank (Jamaica) Limited acting on my/our instructions in whole or in part sent by Fax, E-mail or Verbally;
8. to be jointly and individually liable under this authority and indemnity in respect of any and all joint accounts;
9. that JMMB Bank (Jamaica) Limited is providing me/us with an additional contractual service via this agreement, and will hold and enforce the terms of this agreement on me us and any additional party(ies) I may add to my/our account for which this service will apply;
10. that I/we acknowledge that providing instruction regarding my/our account(s) to JMMB Bank (Jamaica) Limited via Fax and or E-mail and verbally is for my/our convenience and in my/our interest only and at our sole discretion and is not a feature of my investment.

Other Client/Account Update (Please indicate below any other update being requested e.g. contact person's name, address, mother's maiden name, phone no., account address, mail status)

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CONSENT & DECLARATION

I confirm that by signing this form, I declare and acknowledge that the information given by me is correct and will be relied upon by the JMMB Group; also that I am authorizing JMMB Group to take such steps as it may deem necessary to verify any of the information provided by me. I have read this form, before signing and am aware of the obligations contained herein.

This Agreement may be executed in any number of counterparts, each of which shall be deemed an original but all of which together shall constitute one and the same instrument, and shall become effective when counterparts have been signed by each of the relevant clients and delivered to JMMB; it being understood that all clients need not sign the same counterparts.

Client's Signature

Name of JP/Notary Public.....



Date

Signature

Client's Signature

(Applicable if any 2 to sign)

Name of JP/ Notary Public



Date

Signature

Please indicate your US FATCA Status by signing at A or B below

A. FATCA CERTIFICATION FOR NON-US PERSONS

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner or account holder at a foreign financial institution,
- The person named on the 'Client Name' line of this form is not a U.S. person,

- The income to which this form relates is:
 - a) not effectively connected with the conduct of a trade or business in the United States,
 - b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - c) the partner's share of a partnership's effectively connected income,
- The person named on the 'Client Name' line of this form is a resident of the treaty country where they indicated tax is paid of the form (if any) within the meaning of the income tax treaty between the United States and that country, and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will advise JMMB immediately if any certification made on this form is no longer valid.**

.....
Signature of beneficial owner (or individual authorized to sign for beneficial owner)

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Date (DD/MM/YYYY)

B. FATCA CERTIFICATION FOR US PERSONS

Under penalties of perjury, I certify that:

1. The Taxpayer Identification Number (TIN) provided is my correct TIN (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person

Certification instructions - You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

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Signature of US Person

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Taxpayer Identification Number (TIN)

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Date (DD/MM/YYYY)

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Signature of individual authorized to sign for beneficial owner

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Name

.....
Date (DD/MM/YYYY)

TO BE COMPLETED BY JMMB PERSONNEL ONLY

Documents Received from Client (kindly attach to this form)

- | | | |
|--|---|---|
| <input type="checkbox"/> Driver's Licence | <input type="checkbox"/> Passport | <input type="checkbox"/> National ID + Birth Certificate/Adoption Certificate |
| <input type="checkbox"/> Resident/ Citizenship Card + Birth/Adoption Certificate | | |
| <input type="checkbox"/> Proof of Residential Address | <input type="checkbox"/> TRN (or foreign equivalent) | <input type="checkbox"/> Notarized Picture + Birth Certificate (Minors only) |
| <input type="checkbox"/> Birth/Adoption Certificate | <input type="checkbox"/> Marriage Certificate | <input type="checkbox"/> Decree Absolute |
| <input type="checkbox"/> Certificate of Loss of Nationality of the United States | <input type="checkbox"/> Missing Certificate of Loss of Nationality of the United States Form | |

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Received by

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Signature

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Date (DD/MM/YYYY)

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Created by

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Signature

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Date (DD/MM/YYYY)

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Authorized by

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Signature

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Date (DD/MM/YYYY)

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Checked by

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Signature

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Date (DD/MM/YYYY)