

USA Client Application Form

1: General Information

Legal Business Name

Doing Business As (DBA) (Please provide a Business License if applicable)

Address

City

State

Zip/PostalCode

Country

Business Phone Number

Email Address

Nature of Business (Specify):

2: Registration Information*

Organizational Type (ex. Incorporated, Sole Proprietor, Holding Company, etc...)

Registration number

State

Date of Incorporation

3: Shareholder Information

Individuals or Entities who, directly or indirectly, own or control 25% or more of the company.

Full Name / Entity Name	Ownership %	Date of Birth	Occupation	Residential / Registered Address

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4: Directors Information

Full Name	Date of Birth	Occupation	Residential Address

5: Signing Authority and Authorized Representatives

I / We have the authority to bind the Corporation. I certify that the following individuals occupy the positions listed below and I certify that the following are valid specimen signatures of those individuals listed below: Each of the following persons, by signing below, and consents to the collection, use and disclosure of their personal information for any reasonably ancillary purposes.

Full legal Name	Occupation	Authorized signature	Date (mm/dd/yyyy)

Full legal Name	Occupation	Authorized signature	Date (mm/dd/yyyy)

6: Third Party Determination Statement

A 'Third Party' is the person or entity that instructs another person or entity to conduct a transaction or activity on their behalf.

Will your VoPay account be used by, or on behalf of a Third Party? ☐ Yes ☐ No

7: PEP Information

Are any of the individuals listed above or transacting with VOPAY Politically Exposed Persons (PEP), ☐ Yes ☐ No or relatives and close associates of a PEP?

*A politically exposed person (PEP) is defined by the Financial Action Task Force (FATF) as an individual who is or has been entrusted with a prominent public function. Relatives and Close Associates (RCA) are the individuals or businesses in some cases which have a close connection with or somehow related to a Politically Exposed Person (PEP).

8. Client Application Authorization

I/We undersigned certify that all of the above information provided to VoPay to establish a business relationship is accurate and complete.

Primary Signing Authority	Authorized signature	Date (mm/dd/yyyy)
Secondary Signing Authority	Authorized signature	Date (mm/dd/yyyy)