|  |  |  |
| --- | --- | --- |
| **FOREIGN ACCOUNT INFORMATION** | | |
| 1. | Type of account: | ❑Individual ❑Corporate |
| 2. | Name of Account: | |
| 3. | Is this account a foreign financial institutions such as a: (1) a foreign bank; (2) a foreign branch of a U.S. bank; (3) a business organized under a foreign law that, if it were located in the United States, would be a securities broker-dealer, futures commission merchant, introducing broker in commodities, or a mutual fund; and (4) a money transmitter or currency exchanger organized under foreign law. | ❑Yes ❑No If “Yes” please complete the Foreign Financial Institution Enhanced Due Diligence Questionnaire. |
| 4. | Is this account maintained for a current or former Politically Exposed Person or Foreign Public Official? | ❑Yes ❑No If “Yes” please provide the name of that official and the official’s immediate family members (including former spouses) and the related foreign political organization. |
|  | Official and immediate Family Members: | |
|  | Foreign Political Organization: | |
| 5. | Who referred you to Lek Securities? | |
| 6. | What is your relationship to the person that referred you to Lek Securities and how long have you known him/her? |  |
|  | | |
| **Initial TRANSACTION FOR FOREIGN Account** | | |
| 7. | Type of Deposit (Securities, Cash, ACAT, DTC): |  |
| 8. | Value of Initial Deposit: |  |
|  | | |
| **Corporate FOREIGN Accounts** | | |
| 9. | Name of Corporate account: |  |
| 10. | What type of business does corporation conduct? |  |
| 11. | Geographic location of corporation’s business market: |  |
| 12. | Name and title of Officer #1 that has authority to transact business with the corporate account: |  |
| 13. | Name and title of Officer #2 that has authority to transact business with the corporate account: |  |
|  | | |
| **INDIVIDUAL FOREIGN Accounts** | | |
| 14. | Name if Individual Account: | |
| 15. | Name of Employer: | |
| 16. | Self Employed? | ❑Yes ❑No |
| 17. | What type of work do you do? |  |
| 18. | Do you own any businesses? | ❑Yes ❑No |
| 19. | What are your sources of income? | |
|  | | |
| 20. | Do you have any other brokerage accounts? | ❑Yes ❑No |
| 21. | Identify any other broker accounts with name and account number: |  |
|  | | |
| **GENERAL INFORMATION FOR ALL FOREIGN ACCOUNTS** | | |
| 22, | Can you speak/read/write English?: | ❑Yes ❑No |
| 23. | If “No,” please respond to the following: |  |
|  | a. What is the name of the individual assisting you with completing this questionnaire? |  |
|  | b. What is your relationship with the individual assisting you with completing this questionnaire? |  |
|  | c. How long have you known the person who is assisting you with completing this questionnaire? |  |
| 24. | What is your Phone Number?: |  |
| 25. | What is your Email address?: |  |
| 26. | Physical Address for this Account: | |
|  |
| 27. | Address of Officer or individual account holder: | |
|  |
| 28. | Mailing address for this Account; | |
|  |
| 29. | If mailing address for account is different from  the Physical address for the account,  please explain why mail should be sent to mailing address.: | |

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|  |  |  |  |
| **Signature** | **Print Name** | **Title** | **Date** |

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**Supervisor Approval / Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**