

SOURCE OF FUNDS DECLARATION FORM

PLEASE TICK THE APPROPRIATE BOXES AND ATTACH SUPPORTING DOCUMENTS WHERE APPLICABLE.

SECTION A. Client Information		Date:	Date:		
Full Name:					
Date of Birth/Incorporation:			National Identification /DP/Passport No.		
Business / Residence No.	Country of	Country of Residence:			
Address of Home / Registe	ered Office:				
Occupation/ Nature of Bus					
Fax Number: Email Address:					
SECTION B. IDENTIFICA	ATION (MINIM	UM OF TWO)			
ID Type (Please tick two)	Number	Country of Issue	Expiry Date	Documents	Attached
Passport				Yes	No
National ID Card				Yes	No
Driver's Permit				Yes	No
SECTION C: DECLARATION	ON OF TRANS	ACTION, CURRENCY AN	D AMOUNT OF M	ONEY	
Total amount of Cash Tran	Total Amou	Total Amount of Non-Cash Transaction			

Total:

SECTION D. DECLARATION

I declare that the Source of Funds for this transaction is

As a matter of policy, the Furness Group of Companies verify the source of funds before accepting payment. Consent is hereby given to Furness Group of Companies to disclose the information herein to other members of the Furness Group of Companies and/or to regulatory and Law Enforcement Authorities.

Name	Signature	Date:
FOR OFFICIAL USE ONLY		
Approved by:	Recipt no.:	Date:
Compliance Officer:	Signature:	Date:
A MEMBER OF THE FURNESS GROUP OF COMPANI	ES	www.furnessrentals.com 1