

Know Your Client (KYC): Individual

Who completes this form: Every individual client, and every person who signs for a company client or will receive a payment.

Fields marked * are required. You may type into this form before printing. Then print it, sign it by hand, scan it and upload it in the client portal at toppaymaster.com/portal/forms.

1. Personal information

Full legal name (as on passport or ID) *

Other names used (maiden name, aliases)

Date of birth *

Place of birth (city and country) *

Citizenship(s) *

List every country of citizenship

Country of residence *

Full country name

Occupation or profession *

Employer or business name

2. Residential address and contact

Street address (no P.O. boxes) *

City *

State, province or region

Postal code

Country *

Mailing address, if different

Phone number (with country code) *

Used to confirm payment instructions by phone

Email address *

3. Identification document

Type of document *

Document number *

Issuing country and state, if any *

Issue date

Expiration date *

4. Tax status

Are you a U.S. citizen, U.S. resident or green card holder? *

Yes: upload IRS Form W-9. No: upload IRS Form W-8BEN.

Country where you pay income tax *

5. Your role in the transaction

Your role *

Are you acting for someone else (a company or another person)? *

If yes, their full name or company name

A company also completes the KYB form; another person completes their own KYC form

Short description of the transaction *

6. Political exposure, sanctions and legal history

Do you hold, or have you held in the last five years, a senior government, judicial, military, political party or state owned company position in any country? *

Are you a family member or known close associate of such a person? *

Are you, or any company you own or control, named on a sanctions list (OFAC, UN, EU, UK or other), or located in or acting for a sanctioned country or region? *

Have you ever been convicted of, or pleaded guilty or no contest to, fraud, money laundering, bribery, tax evasion or another financial crime? *

Are you currently charged, under investigation or the subject of a regulatory action for any of those matters? *

If you answered Yes to any question in this section, explain here

7. Bank relationship

Full account numbers go on the Payment Instructions form, not here.

Main bank used for this transaction *

Bank's country *

Name on the account *

8. Declarations

I authorize Law Office of Madaen to verify the information in this form and to screen me, and any company I represent, against the sanctions and watch lists published by the U.S. Department of the Treasury Office of Foreign Assets Control (OFAC), the United Nations, the European Union, the United Kingdom and other public sources, both now and while any funds are held.

I understand that Law Office of Madaen may refuse to accept funds, may hold funds, or may return funds to the account they came from if any information is incomplete, inconsistent or untrue, if a screening result needs review, or if the law requires it. Law Office of Madaen is not required to explain the reason when the law does not allow it.

I will tell Law Office of Madaen in writing, within five business days, about any change to the information in this form.

I declare that the information in this form is true, correct and complete, and that I am not providing it to hide the identity of any other person who has an interest in the transaction.

☐ I agree to the declarations above.

Signatures

Sign by hand after printing, or with your PDF reader's signing tool. By signing, you confirm that everything in this form is true and complete and you agree to its terms.

Client	Printed name
	Title (if signing for a company)
	Date
Signature	

Supporting documents

Please also upload a clear copy of the passport or driver's license listed below, a recent utility bill or bank statement showing your home address, and an IRS Form W-9 (U.S. persons) or Form W-8BEN (non U.S. persons). Do not type a Social Security number on this form; it goes on the W-9 only. Upload this signed form and your documents in the client portal at toppaymaster.com/portal/forms. If you cannot upload, call (714) 782-7275.