



CUSTOMER QUESTIONNAIRE – INDIVIDUAL

A. APPLICANT'S GENERAL INFORMATION

First name (as stated on th	ie		
official identity card/passp	ort):		
Last name (as stated on th	e		
official identity card/passp	ort):		
Date of birth:		Place of birth:	
Nationality (citizenship):		Passport/ID number:	
In case of multiply			
citizenship, please			
specify countries			
Full permanent	Street	Number	Flat
residential address	3331		
residential address			
	City	Postcode	Country
	City	Tostcode	Country
B. CONTAC	T DETAILS		
B. CONTAC	I DETAILS		
Correspondence address	Street	Number	Flat
(if different from			
residential address)			
	City	Postcode	Country
Personal email			
Phone number (home) Phone number (mobile)			
Fax number, if any			
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C BUCINES		_	
C. BUSINES	S AND ECONOMIC PROFIL	.E	
Employment status and pr	ofession/occupation (please	provide CV):	
□ Employee		•	
Name of the employer:			
Current job title (positio	n):		
□ Self-employment	•		
Nature of business:			
□ Business owner			
Name of the company:			
Nature of business:			
□ Unemployed			
□ Retired			
☐ Other <i>please specify</i>			
United pieuse specify			
Ann. 1101 - 1101	alden of any local ansist 2.163	(as places appelf the reserve	/ af abayabalding
	older of any legal entity? If \	res, please specify the names, %	6 of shareholding and nature of
business:			
Signature of client:			





Income and wealth

Γ-	T
Source of income	Amount of income per year, EUR
Income from employment	
Dividends	
Borrowed funds	
Retirement income	
Rental income	
Interests from deposits	
Investments	
Total Annual income	€
applicable:	ealth (origin of the entire accumulated wealth (i.e. total assets), all as vidends Inheritance Sale of assets Investment income
Estimated total wealth:	€
	ne establishment of a business relationship with Wise Wolves Finance LTD ng term investments, short term investments, etc):
	s □ Trading in low liquid financial instruments on with financial instruments □ Spot trading (physical delivery)
Please indicate which of the following types of	of instrument you would like to trade:
☐ Shares ☐ Futures/Options	☐ Other, please specify:
☐ Bonds ☐ Other derivatives	
☐ ADR/GDR ☐ Structured products	
·	o cooperate with persons from the US and to perform transactions to
Please indicate, on which trading venues / ma ☐ Russian stock-exchanges & OTC ☐ Other stock-exchanges, please specify: ☐ Other OTC	arkets you intend to trade:
Please indicate, trading venues / markets / fir	nancial instruments you would like to avoid:

Signature of client:	



Anticipated account turnover: (please fill in below)

Volume				
Amount per year in EUR:				
Frequency				
please underline as approp	riate:	Number of tra	nsactions:	
per week/month/year				
Level of transactions	<100K	100k	K-500K	>500K
(approximately, in EUR)				
Number of Incoming				
transactions	□weekly □ monthly □yea	rly uweekly um	onthly 🗆 yearly	□weekly □ monthly □yearly
Number of Outgoing transactions	□weekly □ monthly □yea	rly uweekly um	onthly □yearly	□weekly □ monthly □yearly
Please indicate source of fu (e.g. origin of the funds bei Income from employmen Other (please specify):	ng invested, deposited, or	wired as part of th	e business relatio	onship), all as applicable:
Expected origin of incoming	g funds to be credited in tl	he account:		
Countries		Banks		
Expected destination of ou	tgoing transfers/payments	s:		
Countries		Banks		
D. FATCA/ (CRS INFORMATION			
Please submit the forms as	follows			
Are you a citizen of U.S.?	Y/N	If Yes, the form	If Yes, the form W-9	
Are you a resident of U.S?	Y/N	If Yes, the forn	If Yes, the form W-9	
If none of the above, the fo	orm W-8BEN			
CRS				
Tax residence country (all countries of tax residen	Tax Identification	n number (TIN)	If no TIN,	, please specify the reason

Signature of client:



E. INFORMATION ON POLITICALLY EXPOSED PERSONS

	Y/N
	,
	(if any Yes, please complete the information in this Part E,
	If No, please continue to the Part F)
Are you a PEP ¹ ?	
Is any of your immediate	
family members a PEP?	
Is any of your close	
associates a PEP?	

Please fill in the below if any PEP is identified in the table above:

Name of your immediate family member(s) OR close asset	ociate (s) who is/are PEP(s)):	
, , , , , , , , , , , , , , , , , , , ,	(-)	
In case of immediate family member or close associate		
of a PEP, please specify RELATIONSHIP		
	, , . , , , ,	
Organisation/employer of PEP:	Occupation/position of PEP:	
Country of the position held:		
Period in which this individual has held the political or	From	
public function	То	
Ability to move government funds during the period that	t position has been held Y/N	
If yes, please provide details:	1 2	
1 1		

Indicative list of functions for Politically Exposed Persons:

- a. heads of State, heads of government, ministers and deputy or assistant ministers;
- b. members of parliament or of similar legislative bodies;
- c. members of the governing bodies of political parties;
- d. members of supreme courts, of constitutional courts or of other high-level judicial bodies, the decisions of which are not subject to further appeal, except in exceptional circumstances;
- e. members of courts of auditors or of the boards of central banks;
- f. ambassadors, chargés d'affaires and high-ranking officers in the armed and security forces;
- g. members of the administrative, management or supervisory bodies of State-owned enterprises;
- h. directors, deputy directors and members of the board or equivalent function of an international organisation.
- i. Mayors

'family members' includes the spouse, partner, the children and their spouses and partners, the parents.

'persons known to be close associates':

- (a) natural persons who are known to have joint beneficial ownership of legal entities or legal arrangements, or any other close business relations, with a politically exposed person;
- (b) natural persons who have sole beneficial ownership of a legal entity or legal arrangement which is known to have been set up for the de facto benefit of a politically exposed person.

Signature of client:	Signature of client:	e of client:

¹ "Politically exposed person" means a natural person who is or who has been entrusted with a prominent public function in the Republic or abroad (e.g. Heads of State, Members of Parliament, Heads of judiciary, Ambassadors etc.) and includes the family members of such person (spouse, partner, children, children's spouses and partners, parents) and persons known to be close associates of such person (e.g. business associates).



F. APPROPRIATENESS TEST

The information regarding the authorized person's knowledge and experience in the investment field relevant to the specific type of product or service is required, so as to enable the Wise Wolves Finance LTD to assess whether the investment service or product demanded is appropriate for the client.

Where no information or insufficient information provided, the Wise Wolves Finance LTD will be not in a position to determine whether the service or product envisaged is appropriate for the Company.

Knowledges	
Education	 University Degree (Business, Finance, Banking, Accounting, Economy) Other University degree: MBA Degree / MSc in Finance, Banking, Accounting, Economy Other please specify:
Professional Finance Services Qualification, please specify, if any	
Attended courses/seminars in Financial markets, Investments, etc, related certificates, if any. Please specify subject, date, etc	
Experience	
Current or previous occupation related to financial/investment services, financial instruments, markets. Please specify the position, name of the employer, period of employment Experience in investment/ financial	□ Never traded
services	 Occasional trading Regular/frequent trading Other, please specify:
Transactions with which you are familiar with	 □ Sale/purchase of financial instruments □ REPO □ Other, please specify:
Types of services with which you are familiar with	 □ Brokerage services □ Custody services □ Investment advice □ Portfolio management □ Other, please specify:

Signature of client:	





Trading experience				
Financial instruments	Tick the instruments you traded	Specify the average volume you traded (annually in EUR)	Specify the period you traded	Specify the frequency of trading
Equity and equity like (shares, depository receipts, units, etc)				
Bonds				
Certificates and promissory notes				
Money-market instruments (treasury bills, certificates of deposit, commercial paper)				
Shares or units in UCITS				
Structured deposits				
Options				
Warrants				
Futures				
Swaps				
Forward agreements				
Any other derivative contracts relating to securities				
CFD				
FX / FX swaps				
Structured Financial Instrument				

For internal use only:			
Appropriateness test result:			
Assessed by:	Signature:	Date:	
·		·	
Signature of client:			



G. DECLARED BANKING INFORMATION / PAYMENT DETAILS

Kindly note that we will accept remittances from and will make transfers only to the account(s) specified below

Beneficiary	Beneficiary	
Beneficiary account / IBAN	Beneficiary account / IBAN	
Beneficiary Bank	Beneficiary Bank	
SWIFT Code	SWIFT Code	
Correspondent Bank	Correspondent Bank	
SWIFT Code	SWIFT Code	
Correspondent Account	Correspondent Account	
Beneficiary	Beneficiary	
Beneficiary account / IBAN	Beneficiary account / IBAN	
Beneficiary Bank	Beneficiary Bank	
SWIFT Code	SWIFT Code	
Correspondent Bank	Correspondent Bank	
SWIFT Code	SWIFT Code	
Correspondent Account	Correspondent Account	
enquiries which it may consider necessary for of necessary for Wise Wolves Finance Ltd to reque diligence process of the company. ✓ I confirm that in cases any of the information that inform Wise Wolves Finance Ltd without delay. ✓ I have read, understood and agreed with the Agree	ormation and I authorize Wise Wolves Finance Ltd to make confirmation of such information. I understand that it may st further documentation and information to complete the at is provided in this questionnaire changes then I am obliged ement (namely the Client Agreement and the Client Classificator Conflicts of Interest Policy, Best Interest and Order Execution Policy for Clients and Privacy Policy).	be due d to
Signature: Name: Date:		

Signature of client: