



SOURCE OF FUNDS FORM
(COMPLETE IN BLOCK LETTERS)

ACCOUNT HOLDER	OCCUPATION / TYPE OF BUSINESS	DATE		
		DD	MM	YY
ADDRESS	TYPE OF TRANSACTION			
	CURRENCY	AMOUNT		
	TT EQUIVALENT			
(NOT THE ACCOUNT HOLDER) NAME OF DEPOSITOR	ACCOUNT NO.			
RELATIONSHIP WITH ACCOUNT HOLDER	VALID IDENTIFICATION: _____ DP _____ NAT. ID (Please provide one) _____ PP			
ADDRESS				
	STATUS			
	Resident <input type="checkbox"/>	Non-Resident <input type="checkbox"/>	DATE OF BIRTH	
CONTACT NO(s). HOME	COUNTRY OF ORIGIN (TO BE COMPLETED IF NON-RESIDENT)			
BUSINESS EXT			DD	MM YY

The source of funds is: -

(Particulars are required for all sources of funds. Documentary evidence may be required)

I declare that, the funds were not derived from or are being employed in any illegal transaction by the person/company for whom/which I am acting. Consent is also hereby given to my stock broker to disclose this information to WiPay and the Law Enforcement authorities, if required.

Personal Customer		
Name:	Signature:	Date:
Business/Entity- (To be signed by an authorized Signatory, Senior Officer or Director of the Entity, Partner if Partnership, Trustee if Trust, Executor/Administrator if estate)		
Name:	Signature:	Date:

Company Stamp:

- Transaction Accepted
- Transaction Declined (Customer's explanation refused/unreasonable)

_____ *Transaction Taken by*

_____ *Authorizing Official's Signature*