

INDIVIDUAL IDENTIFICATION INFORMATION RECORD
Information required by the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*.

Vendor: **AMACON DEVELOPMENT (CITY CENTRE) CORP.**

Lot/Suite #: **3408** Phase/Tower: **TWO** Plan No.:

Street: in the **City** of **Mississauga**

Date of Offer: **April 25, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | MARIA FE VIZMANOS |
| 2. Address: | 26 OPENBAY GARDENS,
BRAMPTON, ONTARIO, L6R 0V4 |
| 3. Date of Birth: | March 31, 1954 |
| 4. Principal Business or Occupation: | <u>micro biologist</u> |
| 5. Identification Document (must see original): | <u>PASSPORT</u> |
| 6. Document Identification Number: | <u>PASSPORT # - QE121615</u> |
| 7. Issuing Jurisdiction: | <u>ON</u> |
| 8. Document Expiry Date (must not be expired): | <u>June 08/2016</u> |

NOTE: This section must be completed for each purchaser. If the individual refuses to provide information must make a record of same detailing what efforts were made to get such information.

Acceptable Identification Documents: birth certificate, driver's licence, passport, record of landing , permanent resident card, old age security card, certificate of Indian Status or SIN card (although SIN numbers are NOT to be provided to FINTRAC). If the identification is from a foreign jurisdiction should be equivalent to one of the above noted documents. Provincial health card NOT an acceptable form of identification.

Verification of Third Parties (if applicable)

Note: Must be completed with a client or unrepresented individual if acting on behalf of a third party. If you suspect the client is acting on behalf of a third party but cannot verify same you must keep record of that fact.

- | | |
|---|-------|
| 1. Name of third Party: | _____ |
| 2. Address: | _____ |
| 3. Date of Birth: | _____ |
| 4. Principal Business or Occupation: | _____ |
| 5. Incorporation number and place of issue (corporations/other entities only) | _____ |
| 6. Relationship between third party and client: | _____ |

This passport is valid for all countries unless otherwise endorsed (subject to any visa or other entry regulations of countries to be visited).

[Illegible text from a document page]

Ce passeport est valable pour tous les pays, sauf indication contraire (le titulaire doit également se conformer aux formalités d'entrée des pays où il a l'intention de se rendre.)

mais Dr C. Wagner

CANADA

PASSEPORT

Type/Type	Issuing Country/Pays émetteur	Passport No /N° de passeport
P	CAN	QE121615
Surname/Nom		

Surname/Nom

Issuing Country/Pays émetteur
CAN

Passport No./N° de passeport
QE121615

VIZMANOS

Given names/Prénoms

MARIA FE

Nationality/Nationalité

CANADIAN/CANADIENNE

Date of birth/Date de naissance

31 MAR /MARS 54

Sex/Sexe

Place of birth/Lieu de naissance

F
MANILA PHL

Date of issue/Date de délivrance

08 JUNE/JUIN 11 BRAMPTON

Date of expiry/Date d'expiration

08 JUNE/JUIN 16

maior de Vagos

[illegible]

Rec'd by Smith
Apr. 125/15

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Information required by the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*.

Vendor: **AMACON DEVELOPMENT (CITY CENTRE) CORP.**

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Date of Offer: **April 25, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

1. Full Legal Name of Individual: **DANILO VIZMANOS**
2. Address: **26 OPENBAY GARDENS,
BRAMPTON, ONTARIO, L6R 0V4**
3. Date of Birth: **April 26, 1953**
4. Principal Business or Occupation: VETERINARY OFFICER, CANADIAN FOOD INSPECTION AGENCY
5. Identification Document (must see original): Driver's licence
6. Document Identification Number: **V4771-15305-30426**
7. Issuing Jurisdiction: ON
8. Document Expiry Date (must not be expired): 04/26/2019-

NOTE: This section must be completed for each purchaser. If the individual refuses to provide information must make a record of same detailing what efforts were made to get such information.

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Verification of Third Parties (if applicable)

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1. Name of third Party: _____
2. Address: _____
3. Date of Birth: _____
4. Principal Business or Occupation: _____
5. Incorporation number and place of issue (corporations/other entities only) _____
6. Relationship between third party and client: _____

Ontario Driver's Licence / Permis de conduire ON CANADA

1,2 NAME/ NOM
VIZMANOS,
DANILO
3 26 OPENBAY GDNS
BRAMPTON, ON, L6R 0V4

4,6 NUMBER/ NUMERO
V4771 - 15305 - 30426
4,6 ISS/ DEL 2014/04/25 4,6 EXP/ EXP 2019/04/26

5 DO/ REF CX1198679 16 HGT/ HAUT 173 cm

15 SEX/ SEXE M
9 CLASS/ CATEG G
12 REST/ COND

3 DOB/ ODN 1953/04/26

Rec'd by Luke
Apr. 12 2015