

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 #: **2419** Phase/Tower: **9 South** Plan No.:

Street: **4055-4085 Parkside Village Drive** in the City of **Mississauga**

Date of Offer: **May 12, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

- | | |
|---|--|
| 1. Full Legal Name of Individual: | ROBERT LEE MARTINS |
| 2. Address: | 127 PINEMEADOW DRIVE,
WOODBIDGE, ONTARIO, L4L 9J4 |
| 3. Date of Birth: | October 30, 1990 |
| 4. Principal Business or Occupation: | <u>AV Technician</u> |
| 5. Identification Document (must see original): | <u>Drivers Licence</u> |
| 6. Document Identification Number: | <u>M0691-65869-01030</u> |
| 7. Issuing Jurisdiction: | <u>Ontario</u> |
| 8. Document Expiry Date (must not be expired): | <u>2019/10/30</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: | _____ |

Ontario Driver's Licence Permis de conduire ON CANADA

1,2 NAME/ NOM
MARTINS,
ROBERT, LEE
3 127 PINEMADOW DR
WOODBIDGE, ON, L4L 9J4

4d NUMBER/
NUMERO M0691 - 65869 - 01030

4a ISS/ DEL 2014/10/06 4b EXP/ EXP. 2019/10/30

5 DO/ REF DA0840627 16 HGT/ HAUT 175 cm

15 SEX/ SEXE M

9 CLASS/
CATEG. G

12 REST/
COND.

3 DOB/ DDN 1990/10/30

Robert Martins

Received by Anita

May 12/15