

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 #: **1802** Phase/Tower: **TWO** Plan No.:

Street: in the **City of Mississauga**

Date of Offer: **May 09, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | ZAIN EL DIEN KA HASSAN |
| 2. Address: | 3135 TURBINE CRES,
MISSISSAUGA, ONTARIO, L5M 6W1 |
| 3. Date of Birth: | November 15, 1962 |
| 4. Principal Business or Occupation: | <u>BUSINESSMAN</u> |
| 5. Identification Document (must see original): | <u>DRIVERS' LICENCE</u> |
| 6. Document Identification Number: | <u>H0764-79206-21115</u> |
| 7. Issuing Jurisdiction: | <u>ONTARIO</u> |
| 8. Document Expiry Date (must not be expired): | <u>2018/08/30</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

12 NAME / NOM
HASSAN,
ZAIN EL DIEN, KA
3135 TURBINE CRES
MISSISSAUGA, ON, L5M 6W1

4d NUMBER /
NUMERO H0764 - 79206 - 21115

4e ISS / DEL 2013/09/03 4b EXP / EXP 2018/08/30

5 DO / REF CR7818258 16 HGT / HAUT. 165 cm

10 SEX / SEXE M

9 CLASS /
CATEG G1 H0764.79206-21115
1962/11/15

12 REST /
COND.

3 DOB / DDN 1962/11/15

VERIFIED I.D.

Dr Lelyak
DRINA LELYAK
MAY 9. 2015

As of JULY-2015, new address

5707 Passionflower Blvd.

MISS. ONT

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

Lot/Suite #: **1802** Phase/Tower: **TWO** Plan No.:

Street: in the City of **Mississauga**

Date of Offer: **May 09, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

1. Full Legal Name of Individual: **SAHAR M HUSSEIN**
2. Address: **3135 TURBINE CRES,
MISSISSAUGA, ONTARIO, L5M 6W1**
3. Date of Birth: **April 19, 1972**
4. Principal Business or Occupation: HOMEMAKER
5. Identification Document (must see original): DRIVER'S LICENCE
6. Document Identification Number: **H9455-68467-25419**
7. Issuing Jurisdiction: ONTARIO
8. Document Expiry Date (must not be expired): 2018/09/16

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
HUSSEIN,
SAHAR, M
3.135 TURBINE CRES
MISSISSAUGA, ON, L5M 6W1

4.1 NUMBER/
NUMERO H9455 - 68467 - 25419

4.1 ISS/ DEL 2013/09/27 4.1 EXP/ EXP 2018/09/18

5.1 DIR/ REF CT0046025 1.6 HGT/ HAUT. 172 cm

1.5 SEX/ SEXE F

9.1 CLASS/ CATEG. G2

1.2 REST/ COND. 1972/04/19

3. DOB/ DON 1972/04/19

Verified I.D.
Dina Leltak
MAY 9 - 2015

As of July 2015 new address
5707 Passionflower Blvd.
MISS. ONT.