

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 #: **2707** Phase/Tower: **TWO** Plan No.:

Street: in the **City of Mississauga**

Date of Offer: **May 06, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

- | | |
|---|--|
| 1. Full Legal Name of Individual: | FAYROUZ N DEIF |
| 2. Address: | 1748 CRATELY COURT,
MISSISSAUGA, ONTARIO, L5N 7L2 |
| 3. Date of Birth: | August 25, 1961 |
| 4. Principal Business or Occupation: | <u>PHARMACY</u> |
| 5. Identification Document (must see original): | <u>DRIVER'S LICENCE</u> |
| 6. Document Identification Number: | <u>D2263-25966-15825</u> |
| 7. Issuing Jurisdiction: | <u>ONTARIO</u> |
| 8. Document Expiry Date (must not be expired): | <u>08/25/2019</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



Fayrouz
3. DOB/00N 1961/08/25

1,2 NAME/ NOM

DEIF,

FAYROUZ,N

1748 CRATELY CRT

MISSISSAUGA, ON, L5N 7L2

4d NUMBER/

NUMERO

D2263 - 25966 - 15825

4a ISS/DEL

2014/06/12

4b EXP/EXP

2019/08/25

5 DD/REF

CX6790348

16 HGT/HAUT

163 cm

15 SEX/SEXE

F

6 CLASS/

CATEG

G

12 REST/

COND

D2263 - 25966 - 15825
1961/08/25

