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 #: **2112** Phase/Tower: **9 South** Plan No.:

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

Date of Offer: **April 21, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

1. Full Legal Name of Individual: **HENRY EDUARDO ORTIZ**
2. Address: **7 HIGH MEADOWS ROAD, BRAMPTON, ONTARIO, L6P 3K6**
3. Date of Birth: **July 09, 1978**
4. Principal Business or Occupation: BUSINESS OWNER
5. Identification Document (must see original): DRIVER'S LICENCE
6. Document Identification Number: **O7633-32437-80709**
7. Issuing Jurisdiction: ONTARIO
8. Document Expiry Date (must not be expired): 07/09/2016

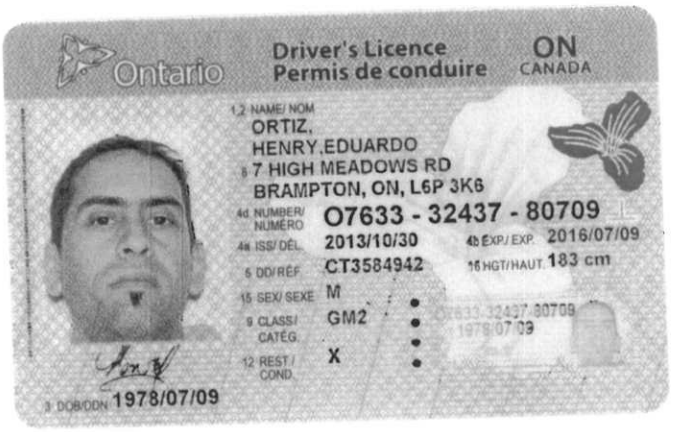
NOTE: This section must be completed for each purchaser. If the individual refuses to provide information must make a record of same detailing what efforts were made to get such information.

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
ORTIZ,
HENRY,EDUARDO
3 7 HIGH MEADOWS RD
BRAMPTON, ON, L6P 3K6
4d NUMBER/ NUMÉRO O7633 - 32437 - 80709
4a ISS/ DÉL. 2013/10/30
4b EXP./ EXP. 2016/07/09
5 DD/ RÉF. CT3584942
16 HGT/ HAUT. 183 cm
15 SEX/ SEXE M
9 CLASS/ CATÉG. GM2
12 REST./ COND. X
3 DOB/DDN 1978/07/09

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 #: **2112** Phase/Tower: **9 South** Plan No.:

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

Date of Offer: **April 21, 2015**

Sales Representative: **In2ition Realty**

Verification of Individual

1. Full Legal Name of Individual: **CLAUDIA P SANCHEZ PALACIOS**
2. Address: **7 HIGH MEADOWS ROAD, BRAMPTON, ONTARIO, L6P 3K6**
3. Date of Birth: **December 18, 1974**
4. Principal Business or Occupation: SELF EMPLOYED
5. Identification Document (must see original): DRIVER'S LICENCE
6. Document Identification Number: **S0387-12877-46218**
7. Issuing Jurisdiction: ONTARIO
8. Document Expiry Date (must not be expired): 18/12/2017

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
SANCHEZ PALACIOS,
CLAUDIA,P
8 7 HIGH MEADOWS RD
BRAMPTON, ON, L6P 3K6
4d NUMBER/ NUMÉRO S0387 - 12877 - 46218
4a ISS/ DÉL 2012/12/12
4b EXP/ EXP 2017/12/18
5 DD/ RÉF CL8681138
16 HGT/ HAUT. 150 cm
15 SEX/ SEXE F
9 CLASS/ CATÉG. G
12 REST./ COND. X
3 DOB/DDN 1974/12/18