

**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: **9 North**    Plan No.:

Street: in the **City of Mississauga**

Date of Offer: **October 31, 2015**

Sales Representative: **In2ition Realty**

**Verification of Individual**

- 1. Full Legal Name of Individual: **ANNA KAI-FONG WONG**
- 2. Address: **4260 HARTFIELD GRV,  
MISSISSAUGA, ONTARIO, L4W 2Y7**
- 3. Date of Birth: **May 19, 1947**
- 4. Principal Business or Occupation: Retired
- 5. Identification Document (must see original): Drivrs Licence.
- 6. Document Identification Number: **W6401-04754-75519**
- 7. Issuing Jurisdiction: Ontario
- 8. Document Expiry Date (must not be expired): 2018/05/19

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: \_\_\_\_\_

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**Verification of Individual**

- |   |  |
|---|--|
| 1. Full Legal Name of Individual:               | <b>BENJAMIN K FUNG</b>                                       |
| 2. Address:                                     | <b>4260 HARTFIELD GRV,<br/>MISSISSAUGA, ONTARIO, L4W 2Y7</b> |
| 3. Date of Birth:                               | <b>September 06, 1945</b>                                    |
| 4. Principal Business or Occupation:            | <u>Retired</u>   |
| 5. Identification Document (must see original): | <u>Drivers Licence</u>                                       |
| 6. Document Identification Number:              | <b><u>F9275-08254-50906</u></b>                              |
| 7. Issuing Jurisdiction:                        | <u>Ontario</u>   |
| 8. Document Expiry Date (must not be expired):  | <u>2020-09-06</u>  |

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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  
FUNG,  
BENJAMIN, K  
4260 HARTFIELD GRV  
MISSISSAUGA, ON, L4W 2Y7

4d NUMBER / NUMERO F9275 - 08254 - 50906

4a ISS / DEL 2015/07/02 4b EXP / EXP 2020/09/06

5 DO / REF DG0625549 16 HGT / HAUT 165 cm


15 SEX / SEXE M

9 CLASS / CATEG G

12 REST / COND X

3 DOB / DDN 1945/09/06

*B. K. Fung*



 Ontario Driver's Licence / Permis de conduire ON CANADA



1.2 NAME / NOM  
WONG,  
ANNA, KAI-FONG  
4260 HARTFIELD GROVE  
MISSISSAUGA, ON, L4W 2Y7

4d NUMBER / NUMERO W6401 - 04754 - 75519

4a ISS / DEL 2013/04/10 4b EXP / EXP 2018/05/19

5 DO / REF CN8940239 16 HGT / HAUT 163 cm

15 SEX / SEXE F

9 CLASS / CATEG G

12 REST / COND

3 DOB / DDN 1947/05/19

*Anna K. F. Wong*

