

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 #: **616** Phase/Tower: **ONE** Plan No.:

Street: in the **City of Mississauga**

Date of Offer: **November 08, 2012**

Sales Representative: **RICHMOND**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | GEORGE KIMON A. BASSILI |
| 2. Address: | 5645 LONGFORD DR.,
MISSISSAUGA, ONTARIO, L5M 7B5 |
| 3. Date of Birth: | September 26, 1970 |
| 4. Principal Business or Occupation: | <u>Hero Burgess</u> |
| 5. Identification Document (must see original): | <u>Driver's Licence</u> |
| 6. Document Identification Number: | <u>B0770-27857-00926</u> |
| 7. Issuing Jurisdiction: | <u>ONT</u> |
| 8. Document Expiry Date (must not be expired): | <u>2014/09/26</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. NAME / NOM
BASSILI, GEORGE, KIMON, A

2. ADDRESS / ADRESSE
**3480 NUTCRACKER DR
 MISSISSAUGA, ON, L5N 6G2**

4. NUMBER / NUMERO
B0770 - 27857 - 00926

4a. ISS/DEL
2010/08/30
 4b. EXP/EXP
2014/09/26

5. DEV REF
AT9025874
 16. HGT/HAUT
189 cm

15. SEX/SEXE
M

9. CLASS / CATEG
G

12. REST / COND
1970/09/26

3. DOB/DEN **1970/09/26**
 6722602

PSV 1 #616

8th NOV 2012, Rn