

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

Street: in the City of **Mississauga**

Date of Offer: **February 25, 2012**

Sales Representative:

**Verification of Individual**

- 1. Full Legal Name of Individual: **ADIBA SALMO**
- 2. Address: **2365 CENTRAL PARK DRIVE Apt 711,  
OAKVILLE, ONTARIO, L6H 0C7**
- 3. Date of Birth: **September 18, 1954**
- 4. Principal Business or Occupation: Housewife
- 5. Identification Document (must see original): \_\_\_\_\_
- 6. Document Identification Number: \_\_\_\_\_
- 7. Issuing Jurisdiction: \_\_\_\_\_
- 8. Document Expiry Date (must not be expired): \_\_\_\_\_

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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Lot/Suite #: **907**      Phase/Tower: **ONE**      Plan No.:

Street: in the City of **Mississauga**

Date of Offer: **February 25, 2012**

Sales Representative:

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**Verification of Individual**

- |   |  |
|---|--|
| 1. Full Legal Name of Individual:               | <b>HASAN HASOON</b>  |
| 2. Address:                                     | <b>2365 CENTRAL PARK DRIVE Apt 711,<br/>OAKVILLE, ONTARIO, L6H 0C7</b> |
| 3. Date of Birth:                               | <b>December 29, 1979</b>   |
| 4. Principal Business or Occupation:            | <u>Self-Employed</u>   |
| 5. Identification Document (must see original): | <u>Licence</u>   |
| 6. Document Identification Number:              | <b><u>H07583180791229</u></b>  |
| 7. Issuing Jurisdiction:                        | <u>ontario</u>   |
| 8. Document Expiry Date (must not be expired):  | _____  |

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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:                               | _____ |

Feb 25 2012  
Suite 907 YK  
yousef

Ontario Driver's Licence Permis de conduire ON CANADA

1,2 NAME / NOM  
HASOON,  
HASAN  
3 ADDRESS / ADRESSE  
2365 CENTRAL PARK DR AP711  
OAKVILLE, ON, L6H 0C7  
4,5 NUMBER / NUMERO  
H0758-31807-91229  
6 DOB / DEL  
2010/04/13  
7 SEX / SEXE  
M  
8 CLASS / CATÉ  
G  
9 EXPI / EXP  
2014/12/29  
10 HGT / HAUT  
172 cm  
11 DOB / DEL  
1979/12/29  
12 REST / COND  
\*5103460\*  
13 I.D. / I.D.  
H0758-31807-91229  
1979/12/29

JK

Government of Canada / Gouvernement du Canada

PERMANENT / CARTE DE RESIDENT / RESIDENT CARD / PERMANENT

CANADA

Name / Nom: SALMO ADIBA

Sex / Sexe: F

Nationality / Nationalité: IRQ

Date of Birth / Date de naissance: 18 SEP / SEPT 1954

ID No / No ID: 5902-999

Expiry / Expiration: DEC / DÉC 2013

Canada

*[Handwritten signature]*

907



Became Permanent Resident On :  
Devenu(e) résident(e) permanent(e) le :  
26 NOV / NOV 2008 TORONTO  
Category/Catégorie : FC4/CF4



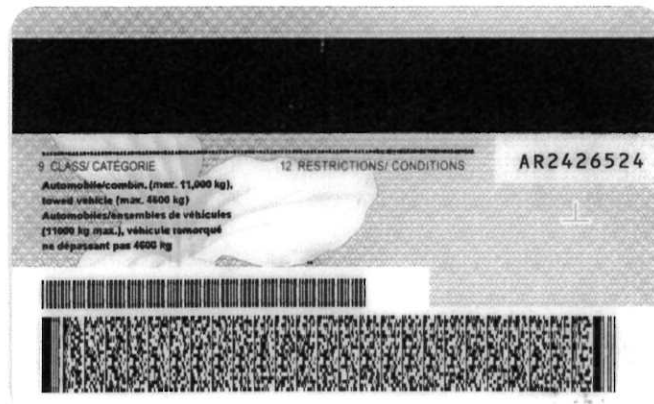
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SALMO<<ADIBA<<<<<<<<<<<<<<<



957

Feb 25 2012

Suite 907 ~~7~~ W



 Ontario



**Health • Santé**

**ADIBA SALMO**

**7192 - 399 - 025 - LE**

BORN/ NÉ(E)  
**1954 - 09 - 18**  
YEAR MONTH DAY

SEX/ SEXE  
**F**

ISS/DEL  
**2009 - 02 - 26**  
YEAR MONTH DAY

EXPI/EXP  
**2012 - 09 - 18**  
YEAR MONTH DAY





*ll*

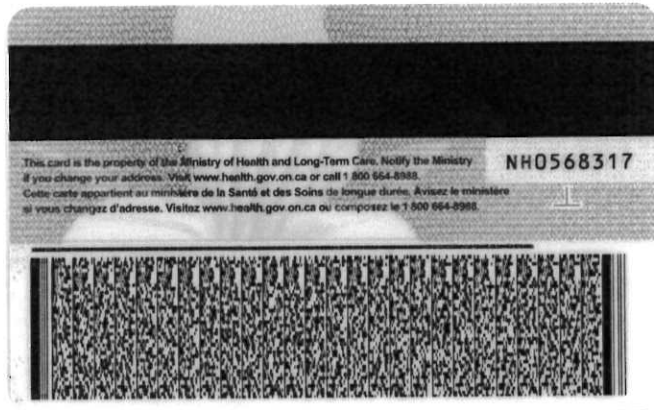
 Government of Canada / Gouvernement du Canada

SOCIAL INSURANCE NUMBER / NUMÉRO D'ASSURANCE SOCIALE

**559 773 601**

**ADIBA SALMO**

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- THIS IS NOT AN IDENTITY CARD. HOWEVER, IT SHOULD BE KEPT IN A SAFE PLACE.
- CECI N'EST PAS UNE CARTE D'IDENTITÉ. CEPENDANT, ELLE DEVRAIT ÊTRE GARDÉE DANS UN LIEU SÛR.
- IF AN EXPIRY DATE APPEARS ON THE FRONT OF THIS CARD, THE SIN MAY NOT BE USED IN CANADA AFTER THAT DATE. THIS CARD IS NOT AN AUTHORIZATION TO WORK IN CANADA.
- SI UNE DATE D'EXPIRATION APPARAÎT SUR LE DEVANT DE CETTE CARTE, LE NAS NE PEUT ÊTRE UTILISÉ AU CANADA APRÈS CETTE DATE. CETTE CARTE N'EST PAS UNE AUTORISATION DE TRAVAILLER AU CANADA.

NAS-2683B (03-08-K)

Canada