

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 #: **2511** Phase/Tower: **ONE** Plan No.:

Street: in the City of **Mississauga**

Date of Offer: **March 01, 2012**

Sales Representative: **REENA**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | REVINA KAUR CHATHA |
| 2. Address: | 551 MATISSE PLACE,
MISSISSAUGA, ONTARIO, L5W 1N3 |
| 3. Date of Birth: | June 01, 1992 |
| 4. Principal Business or Occupation: | <u>STUDENT</u> |
| 5. Identification Document (must see original): | <u>DRIVERS LICENCE</u> |
| 6. Document Identification Number: | <u>C32536515925601</u> |
| 7. Issuing Jurisdiction: | <u>2010/10/07</u> |
| 8. Document Expiry Date (must not be expired): | <u>2013/12/31</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: | _____ |



Driver's Licence
Permis de conduire
ON
CANADA



1 NAME/ NOM
CHATHA,
REVINA, KAUR
551 MATISSE PL
MISSISSAUGA, ON, L5W 1M3

2 NUMBER
C3253 - 65159 - 25601
3 ISS/ DEL
2010/10/07
4 DOB/ REF
AV2874488
5 SEX/ SEXE
F
6 CLASS/
DATE
G2
7 EXPI/ EXP
2013/12/31
8 HEIGHT/ HAUT
170 cm
9 C3253-65159-25601
10 1992/06/01

11 DOB/ CON
1992/06/01
12 *7198178*

9 CLASS/CATEGORIE

Automobilistenclub (max. 11.000 kg),
bevoegd voertuig (max. 4000 kg), with G2
restrictions - Auto/perm. veh.
(11000 kg max.) veh. categorie
4000 kg max. - restrict. nk. G2

12 RESTRICTIONS/ CONDITIONS

A/2874488





Human Resources
Development Canada

Développement des
ressources humaines Canada

SOCIAL	NUMÉRO
INSURANCE	D'ASSURANCE
NUMBER	SOCIALE

519 972 970

REVINA KAUR CHATHA