

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 #: **4211** Phase/Tower: **ONE** Plan No.:

Street: in the City of **Mississauga**

Date of Offer: **March 11, 2012**

Sales Representative: **ALEN C.**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | SALEM AL TAMMIMI |
| 2. Address: | 209 ANNAPOLIS CIR.,
OTTAWA, ONTARIO, K1V 1Y9 |
| 3. Date of Birth: | March 12, 1964 |
| 4. Principal Business or Occupation: | _____ |
| 5. Identification Document (must see original): | _____ |
| 6. Document Identification Number: | <u>A56156840640312</u> |
| 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: | _____ |


Ontario

Driver's Licence
Permis de conduire

ON
CANADA



1.2 NAME/ NOM
AL TAMMIMI,
SALEM

8. 209 ANNAPOLIS CIR
OTTAWA, ON, K1V 1Y9

4d NUMBER/ NUMERO
A5615 - 68406 - 40312

4a ISS/ DEL
2008/01/16

5. DD/ REF
AA6132651

16 SEX/ SEXE
M

9. CLASS/ CATEG
G

12. REST/ COND
6635927

3. DATE OF BIRTH/ DATE DE NAISS
1964/03/12

4b EXP/ EXP
2012/07/23

16 HGT/ HAUT
173 cm

A5615-68406-40312
1964/03/12

3670

4211 Baasha



Government
of Canada

Gouvernement
du Canada

SOCIAL

INSURANCE

NUMBER

NUMÉRO

D'ASSURANCE

SOCIALE

554 826 396

SALEM AL TAMMIMI

36/0

8211