

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 #: **1203** Phase/Tower: **9 North** Plan No.:

Street: in the **City** of **Mississauga**

Date of Offer: **February 28, 2016**

Sales Representative: **In2ition Realty**

Verification of Individual

- | | |
|---|---|
| 1. Full Legal Name of Individual: | RAGHDAA ABDELHADY |
| 2. Address: | 25 AGNES ST Apt 409,
MISSISSAUGA, ONTARIO, L5B 3X7 |
| 3. Date of Birth: | January 01, 1991 |
| 4. Principal Business or Occupation: | <u>Homemaker.</u> |
| 5. Identification Document (must see original): | <u>Driver's Licence</u> |
| 6. Document Identification Number: | <u>A1017-63809-15101</u> |
| 7. Issuing Jurisdiction: | <u>Ontario</u> |
| 8. Document Expiry Date (must not be expired): | <u>2020/01/01</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



1,2 NAME/ NOM

ABDELHADY,
RAGHDAA

3 409-25 AGNES ST

MISSISSAUGA, ON, L5B 3X7

4a NUMBER/
NUMERO

A1017 - 63809 - 15101

4b ISS/DEL

2014/09/23

4b EXP/EXP 2020/01/01

5 DO/REF

CZ9649959

15 HGT/HAUT 162 cm

15 SEX/SEXE

F

8 CLASS/
CATEG

G

12 REST/
COND

3 DOB/DCN 1991/01/01

63809-15101
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