



## DUE DILIGENCE QUESTIONNAIRE - PRIVATE INDIVIDUALS WITH REGISTERED BUSINESS ACTIVITY

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	establishing a busines	ss relati	ionsł	nip		] rep	orting	g data plate sta	cho	ing	es ne do	ata t	hat a	are (	har	naed	١									
١.	Identification Data	of the	Cli	ent	(bus					.,	io de	101	iidi (		Jiidi	.gcu	,									
	Client Name																									
	OIB							$\overline{\top}$				]														
	Country of Establishment																									
	Date of Establishment																									
	SEAT ADDRESS																									
	Street and No.																									
	Place																									
	Country																									
	NAME AND SURNAME								0	IB¹	/ lo	den	tifi	cati	ion	No	<b>).</b>		co	UN	TR	r o	F R	ESII	DEN	ICE
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2.	Business Activity Details of the Client's bus	iness o	perd	utions	5																					
	Number of employees					1 1.													_	_	_	_				
	Client is registered or perform activities related to	18			gam	bling matei	اما				L		es os		_	No No										
							nerav						es es			No										

<sup>&</sup>lt;sup>1</sup> Enter if assigned to an authorised representative of the Client



3.	Purpose of Establishing B (fill only when establishing a business rela		-							
	<ul><li>☐ Transaction Account</li><li>☐ Loans</li><li>☐ Documentary Agreements</li></ul>	☐ Trading	g in Financial Instr y Business and Po	•						
	☐ Treasury Transactions	Other (s	state)							
	Types of transactions to be executed in the account	cross-bo	I transactions order (EU) transac tional transactions							
	If using the account for internation	<del>_</del>			nt international business partners					
	COMPANY NAME/NAME AND OF BUSINESS PARTNER	SURNAME	COUNTRY		NATURE OF BUSINESS					
	Planned annual turnover in the Account	— · — ·								
	Transaction Account used primarily for cash transactions	Yes No								
	Source of assets									
		assets from business partners, sponsors, etc. (loan, etc.)								
		other (state)								
	Expected inflow of assets in the CURRENCY	next 12 months by	currencies	FROM WHIC	H COUNTRY					
	State 3 most important business									
	NAME/COMPANY		TOWN		COUNTRY					
1.										
2.										
3.										

3.



State 3 most important business partners – SUPPLIERS<sup>2</sup>

4.

NAME/COMPANY	TOWN		COUNTRY
1.			
2.			
3.			
Client has no significant suppliers/buyers because business entity's ac business entity's ac	tivity has no	significant sup	
other reasons (state	<del>}</del> )		
Determining Existence of a Fiduciary Relation	onship / Po	ooled account	
You are opening a Transaction Account or establish	ning another	business relati	onship for
your own account (not acting in the capaci	•	•	hereto is mandatory)
You will use the Account as a Pooled account (in or Yes			t belong to the customer's own clients) gence measures for your own customers, including can request that such data be delivered to it at any time)
Tay Decidency			
Tax Residency The information is collected for the purpose of determining tax residen Matters. The information shall be used and exchanged in keeping wit the effect of implementing the obligation of adequate reporting to the	h the valid regulo	ations, adhering to th	e rules and protection measures concerning personal data, to
Information on Owner/Stakeholder			
Name		Surname	
Date of Birth	F	Place of Birth	
Country of Birth	(	OIB	
Residence Address			
Street and No.			
Place			
Country			
Owner/stakeholder is a US tax resident	Yes		
(in keeping with the US tax regulations, US citizens are considered also US tax residents)	□No		
If you are a US citizen and do not regard yourself a US tax resident, please clarify			
Owner/stakeholder is a US tax resident <sup>3</sup>	<ul><li>☐ Yes</li><li>☐ No</li></ul>	Tax Identifica Number	tion

 $<sup>^2</sup>$  Significant buyers/suppliers are those that participate in a Client's business in a significant amount (>5%).  $^3$  US tax resident is required to deliver the W-9 form filled and signed.



State countries (other than US) where the owner/stakeholder is a tax resident and the respective tax identification number

COUNTRY OF RESI	DENCE			TAX IDENTIFICATION NUMBER															
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If you entered no to number for the resp tax residency abov	pective country of	of Country	of tax res		•						the	bu	ısin	ess e	ntit	у			
If the country of res different from the co residency, please c	idence address ountry of tax :larify	is	L																_
Information on	owner/stal	keholder																	
Name				Su	ırnam	ne													
Date of Birth				Plo	ace o	of Bi	irth												
Country of Birth				] OI	IB														
Residence Addres	s																		
Street and No.																			
Place																			
Country																			_
Owner/stakeholder	r is a US tax resi	ident	☐ Yes	;															
(in keeping with the US to considered also US tax r	ax regulations, US c esidents)	itizens are	☐ No																
lf you are a US citiz yourself a US tax re																			
Owner/stakeholder	r is a US tax		Yes				ntifica	ıtion		T					Τ				Τ
resident <sup>3</sup>			☐ No		Num	ibe	r												
State countries (othe		ere the owner/st	akeholder				dent a						łax	ident	ific	atio	on nu	mb	er
COUNTRY OF RESI	DENCE					-14		****			احد،								_
COUNTRY OF RESI	DENCE														Т				
COUNTRY OF RESI	DENCE																		<u> </u>

 $<sup>^{\</sup>rm 3}$  US tax resident is required to deliver the W-9 form filled and signed.



If you entered no tax identification number for the respective country of tax residency above, tick your reason	<ul><li>country of tax residency</li><li>country of tax residency</li></ul>	does not issue TIN did not issue a TIN to the business entity	
, , ,	other (state)		
If the country of residence address is different from the country of tax residency, please clarify			
of information or provides incorrect in	formation to Raiffeisenbank ashed or terminate a previousl	ry. If the Client refuses to exchange a pa Austria d.d. (hereinafter: Bank), the Bank ly made business relationship with the Cl aundering and terrorist financing".	k can reject
requirements of the Bank as the proce	ssor to the effect of customer	this Questionnaire in compliance with the due diligence and fulfilling the obligation the effect of establishing or maintaining the	ons pursuant
By signing this Questionnaire, I confir I undertake to notify the Bank in writin		nat the above information is accurate and the above information immediately.	d updated.
		iffeisen Group members in the country or e exchanged with the respective Raiffeise	
data placed at the Bank's disposal by relationship as well as the data, facts made with the Bank can be used with effect of determining the Client's tax re Cooperation in Tax Matters and that t	the authorised person at the and circumstances that the B in the Bank and the Raiffeise esidency and fulfilment of obhese can be used and exchaations of the residence count	all information in this Questionnaire and a time of establishing and duration of the tank learns in the process of executing an Group members in the country and aboligations arising from the Act on Administrates, in compliance with the regulation tries on their respective tax residents to the ters.	business ny agreement road, to the strative s, to the
We know that any and all information Treatment of Raiffeisenbank Austria d.		ained in the document Rules of Personal [ Bank's Branches and www.rba.hr	Data
Name and Surname of the authorised i	representative/s signing this fo	orm:	
		7	
Place and date:		Certification of the	Client: