

Dear customer!

We are glad to have you as a customer, but we lack some information about you. We need to have this documented in order to comply with the law. We therefore wish to get in touch with you to complement the information.

You can contact us in any way you see fit, preferable by any of the following:

 Answer our questions in the enclosed form and send it, together with an authenticated copy of your ID document, to:

Bergslagens Sparbank AB Box 74 711 22 Lindesberg Sweden

• Contact one of our branch offices. Indicate that we have contacted you via letter to update the information about you and our business relationship.

If you do not contact us, we unfortunately may have to block your bank account. If you contact us to update the requested information you will regain access to the account. Please note that we need your response within two weeks from the above date.

Please contact us if you have any questions!

Telephone 0581 - 88 000 (or +46 (0)581 88 000)

E-mail <u>info@bergslagenssparbank.se</u>

Sincerely,

Bergslagens Sparbank AB



CUSTOMER DUE DILIGENCE PRIVATE CUSTOMER

CUSTOMER					
Name		Personal ID No./Coordination Number/Date of Birth			
Adress		Phone number			
Postalcode and city/place	E-mail				
TAX RESIDENT					
A. Are you tax resident in Sweden? Yes No (Answer the questions below)					
B. A. State country of tax residence and tax identification number TIN. Also fill in form: BI 2225 (Individual tax residency) BI 4110 (Affirmantion regarding limited tax liability in Sweden) BI W 9 (Request for taxpayers)					
Country	TIN				
POLITICALLY EXPOSED PERSON (PEP)					
Are you, any member of your family or close associate, a politically exposed personal persona	on (PEP) ¹ ?				
Yes No					
VOLID FINANCES					
YOUR FINANCES What is your monthly income (before tax)?					
	0 - 100 000 more tha	an SEK 100 000			
How do you earn your income?					
Salary/Pension Income from business ventures (describe these operations below)					
Investment income Student grant/loan Other	aid Other (s	pecify below)			
If "Income from business ventures," describe these operations	,	,			
If "Other," state the source of income					
in other, state the source of mounts					
SAVINGS					
How much savings do you have?					
I have no savings					
Less than SEK 250,000 SEK 250 000 - 500 000	SEK 500 000 - 1 000	000			
SEK 1 000 000 - 2 500 000 SEK 500 000 - 5 000 000 More than SEK 5 000 000					
Where do your savings originate? Inheritance/ Gift Sale of personal property Sale of real estate property					
Other, state what					

¹ A politically exposed person (PEP) is a person who has or has had a prominent public function in a country or in an international organisation. A prominent public function refers to a Head of State, member of parliament, member of the governing bodies of political parties, Prime Minister and other government ministers, judge in the supreme court or supreme administrative court, national auditor, director of the national bank, ambassadors, high military officers (general, lieutenant general, major general, admiral, vice admiral or rear admiral), CEO or member of the board of directors in a nationalised company or a person in senior management of an international organisation (members of the board of director, general secretary, and similar).

	ITH THE BANK	the state of the s		
Which of the banks products/services are you interested in?				
INTERNATIONAL PAYMENTS				
INTERNATIONAL PAYMENTS Will you have any need to send or receive money	from another country?			
Yes (answer the questions below) Describe why you need to send or receive money	No from another country			
Describe with you need to send of receive money	nom another country			
20.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1				
State to/from which countries you will be sending	or receiving these payments to	om		
What amount will you send/receive?				
How often will this be done?				
OTHER				
I hereby certify that the information pro	vided is complete and o	correct		
SIGNATURE				
SIGNATURE Date Signature				
Date Signature				
Date Signature				
Date Signature				
Date Signature				
Date Signature Name (printed)				
Date Signature				
Date Signature Name (printed) BANK NOTES	both voronal ID number			
Date Signature Name (printed)	both personal ID numbe	er and reference number		
Date Signature Name (printed) BANK NOTES	both personal ID numbe	er and reference number	If this is a foreign ID	
Date Signature Name (printed) BANK NOTES Mark the type of ID documentation, fill in SIS marked ID card Driver's license	Swedish EU passp	ort National ID card	document, then a copy shall be archived as per procedure	
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Date Signature Name (printed) BANK NOTES Mark the type of ID documentation, fill in SIS marked ID card Driver's license Other	Swedish EU passp	ort National ID card	document, then a copy shall be archived as per procedure	
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Document all the information in the customer due diligence support system and scan the documents in "Fullmaktsrutinen" as necessary.