

Client Information Form – Entity

This form can be downloaded at:
israelbondsintl.com/forms

- ✓ If the client is an individual, please use the Individual Form. Before you make a purchase, you must complete all sections of this form, sign it and send it to Development Company for Israel (International) Ltd., for sales outside the European Union or Development Company for Israel (Europe) GmbH for sales in the European Union, (each referred to as DCI) at the address set out at the bottom of this page and also sign and return a copy of our Terms of Business.
- ✓ We are required to obtain, verify and record information that identifies each of our clients. We may verify this information through public sources. We will be required to see certain documentation which evidences the ownership of the entity and the identity of the entity's principals and beneficial owners.
 - For foundations: the articles/certificates of incorporation, and an exemption notice showing the foundation/non-profit status
 - For trusts: the trust agreement
 - For companies: The Certificate of Incorporation and the most recent annual accounts
 - For the authorised contact, the directors, authorised signatories and 25%+ beneficial owners:
 - if in person: an original passport, photocard driving license or another comparable government photo ID, as well as an original utility bill or bank statement dated within the last three months
 - if you are not able to visit DCI's offices to provide such documents, please send to us by post, email, scan or fax: a certified copy of a passport, photocard driving license or another comparable government photo ID, as well as an original utility bill or bank statement dated within the last three months
 - In Germany: If you are unable to visit the DCI offices to obtain such documents, please check your identity with Postident. You can find the Postident form on our website at:
www.israelbondsintl.com/pdf-de/Couponvorlage-Postident-Basic.pdf
- ✓ In order to prevent or detect fraud or money laundering, DCI will check and share the information in this application or at any stage, with fraud prevention agencies including consulting information held by such agencies from the electoral register for the purpose of verifying the entity's identity. A record of this check may be retained and used to help other affiliated companies to verify the entity's identity.
- ✓ All personal data provided in this form may also be used as agreed in the Terms of Business.

QUESTIONS?

For clients outside the European Union

United Kingdom
Development Company for Israel (International) Ltd.
Lady Ruth House, Gabriel Mews, Crewys Road,
London NW2 2GD United Kingdom
T +44 (0)20 3936 2712
infoEN@israelbondsintl.com
infoES@israelbondsintl.com

For clients in the European Union

Germany
Development Company for Israel (Europe) GmbH
Hebelstraße 6, 60318 Frankfurt am Main, Deutschland
T +49 69 490470
infoDE@israelbondsintl.com

France
Development Company for Israel (Europe) GmbH
17 rue Dumont d'Urville, 75116 Paris, France
T +33 1 42 85 85 50
F +33 1 42 80 48 39
infoFR@israelbondsintl.com

Development Company for Israel (International) Ltd. is authorised and regulated by the Financial Conduct Authority (FRN: 135266) and is a company registered in England (No. 1415853) with its registered office at Platinum House, Lady Ruth House, Crewys Road, London NW2 2GD United Kingdom.

Development Company for Israel (Europe) GmbH is authorised and regulated by Bundesanstalt für Finanzdienstleistungsaufsicht (BaFin) www.bafin.de, and is a company registered in Germany (No. 114970) with its registered office at Hebelstrasse 6, 60318 Frankfurt a.M., Germany.

The French branch of Development Company for Israel (Europe) GmbH is authorised and regulated by Bundesanstalt für Finanzdienstleistungsaufsicht (BaFin) www.bafin.de, and by Autorité des Marchés Financiers www.amf-france.org, with its registered office at 17 rue Dumont d'Urville, 75116 Paris, France.

Client Information Form – Entity

INTERNAL USE ONLY

Account No.:

This form can be downloaded at: israelbondsintl.com/forms/

1. Entity

Entity type			
<input type="radio"/> Company <input type="radio"/> Partnership <input type="radio"/> Trust <input type="radio"/> Other <input type="text"/>			
Entity name			
Entity registration number	Jurisdiction of incorporation/establishment/formation		Date of formation (dd/mm/yyyy)
Entity registered address			
City	County/Province/State	Post code	Country
Principal place of business	Entity e-mail address (use email of authorised contact)	Entity phone	Entity fax
Mailing address (if different from registered address)			
City	County/Province/State	Post code	Country

2. Authorised contact information

First name	Middle name (if applicable)	Last name	
Date of birth (dd/mm/yyyy)	Place of birth	Nationality	Gender <input type="radio"/> M <input type="radio"/> F <input type="radio"/> Other
Current position and entity position/role			
Professional education/trade/certifications		Highest education level attained	
Other information that may be required to assess your professional knowledge and experience			
E-mail address	Phone 1 <input type="radio"/> Bus. <input type="radio"/> Mobile <input type="radio"/> Home	Phone 2 <input type="radio"/> Bus. <input type="radio"/> Mobile <input type="radio"/> Home	
Permanent address — house/flat #, street			
City	County/Province/State	Post code	Country

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3. Principals of the entity

We are required to identify all partners, trustees, directors who are authorised signatories and 25% or more beneficial owners of the entity. If one of the principals of the firm is an entity, we are required to identify all intermediary entities, as well as the authorised contact(s) and 25%+ beneficial owners of the ultimate controlling beneficiary. Please attach additional pages if necessary.

Is the Principal:

- ☐ An individual (if so, please complete the individual section)
- ☐ An Entity (if so, please complete the entity section)

Individual (if the principal is an individual, please complete the following section)

Relationship to Client Entity (Select all that apply)

- ☐ Director and Authorised Signatory ☐ Partner ☐ Trustee ☐ 25%+ Beneficial Owner ☐ Other

First name		Middle name (if applicable)		Last name	
Date of birth (dd/mm/yyyy)	Place of birth		Nationality		Gender <input type="radio"/> M <input type="radio"/> F <input type="radio"/> Other
E-mail address			Phone 1 <input type="radio"/> Bus. <input type="radio"/> Mobile <input type="radio"/> Home	Phone 2 <input type="radio"/> Bus. <input type="radio"/> Mobile <input type="radio"/> Home	
Permanent address — house/flat #, street					
City		County/Province/State		Post code	

Entity (if the principal is an entity, please complete the following section)

Relationship to Client (Select all that apply)

- ☐ Entity Director ☐ Partner ☐ Trustee ☐ 25%+ Beneficial Owner ☐ Intermediary Entity ☐ Ultimate Controlling Beneficiary

Name		Registration number	
Entity registered address			
City	County/Province/State	Post code	Country

4. Politically exposed persons

Does the above person(s) perform, or is closely associated with a person who performs a political function ("Politically exposed persons")?

"Politically exposed persons" means natural persons who are or have been entrusted with prominent public functions and includes the following:

(i) heads of state, heads of government, ministers and deputy or assistant ministers; (ii) members of parliaments or similar legislative bodies; (iii) members of the governing bodies of political parties; (iv) members of supreme courts, of constitutional courts or of other high-level judicial bodies whose decisions are not subject to further appeal, except in exceptional circumstances; (v) members of courts of auditors or of the boards of central banks; (vi) ambassadors, chargés d'affaires and high-ranking officers in the armed forces; (vii) members of the administrative, management or supervisory bodies of state owned enterprises; (viii) directors, deputy directors and members of the board or equivalent function of an international organization. The categories set out in points (i) to (vii) do not cover middle ranking or more junior officials but cover family members which include: (i) the spouse; (ii) any person considered as equivalent to the spouse; (iii) the children and their spouses or persons considered as equivalent to the spouse; and (iv) the parents.

☐ Yes ☐ No

If Yes, please identify who is politically exposed and provide details:

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5. Business information

Business activity

☐ Professional services ☐ Merchandising ☐ Manufacturing ☐ Other

Business type

☐ Agriculture & forestry/wildlife ☐ Business & information ☐ Construction/utilities/contracting ☐ Education ☐ Other
☐ Finance & insurance ☐ Food & hospitality ☐ Gambling industry ☐ Gaming
☐ Legal ☐ Motor vehicles ☐ Natural resources/environmental ☐ Personal services
☐ Public procurement ☐ Real estate & housing ☐ Arms trade & defense ☐ Transportation
☐ Extractive industries ☐ Health services ☐ Pharmaceutical industry ☐ Payment services

6. Financial experience

Experience with other investments:
(Select all that apply)

☐ EU government bonds ☐ Convertible bonds
☐ Non-EU government bonds ☐ Mutual funds
☐ Corporate bonds ☐ Options
☐ Stocks ☐ Other:

7. Your contact with Israel Bonds

Has the entity ever purchased an Israel bond before?

☐ Yes ☐ No

Name of DCI representative you had contact with

How was the entity introduced to Israel Bonds?

Israel Bonds relationship (e.g. synagogue name, organisation name or affinity group)

8. Signatures

I have enclosed with this form (select relevant enclosures):

- ☐ Signed Terms of Business;
☐ Requested evidence of entity ownership;
☐ Requested ID and address verification requirements for the entity's authorised contact, directors, authorised signatories and 25%+ beneficial owners.

I certify that all of the information I have supplied to DCI on this form or otherwise is accurate, complete and truthful and that I am duly authorised to sign on behalf of the Entity. I agree to notify DCI in writing within 30 days of any material changes to the information supplied by me on this form or otherwise. I further acknowledge that DCI shall not be responsible for any changes to such information unless DCI has received written notice of such changes from me. I understand that DCI does not give investment, legal or tax advice. I further understand that DCI does not disclose personal information about its clients or former clients to anyone, except as set out in the Terms of Business or as otherwise permitted by law.

I confirm that I, the authorised signatory, have a sufficient grasp of English to read and understand all of the English documents presented by DCI.

X _____
Authorised signatory signature Date

Authorised signatory name