Form for Compliance with Preventive Duties of Anti-Money Laundering and Counter-Financing of Terrorism (Main Form – for Party of the Act which is Legal Person)

(Note: For the compliance with the duties in the Laws no. 2/2006 and no. 3/2006, as amended by Law no. 3/2017, the Administrative Regulation no. 7/2006, as amended by the Administrative Regulation no. 17/2017, and the Instructions to Counter Money Laundering and Financing of Terrorism.)

To be filled in by the Registry or the Notary				
Notarial Act No.:		Application No. for Registration:		
•	rs of the Legal Person) legal persons are not required to fill in the items with	**")		
Name				
Registration No.		Place of Registration*		
Date of Establishment*		Type of Registration*		
Contact No.				
Residence*				
Taxpayer Identification No. (TIN)		Country/Region of Issue of TIN	☐ Macao ☐ The Chinese Mainland ☐ Hong Kong ☐ Others	
Part II (Beneficia	ıl Owner)			
(If there is any lega	names of the beneficial owners of the act and all person shareholder involved, please indicated and provide the particulars of the companies	te the relationship w	ith the overall ownership/control structure	
Part III (Represe This act is carried or				

provide his/her particulars in the **Annex** after indicating his/her name.)

Part IV (Payment Method)

Payment Method Cash Currency Amount MOP RMB HKD Others 2 MOP RMB HKD Others Cashier's Order / Cheque Bank Location and Name Cashier's Order / Clean	Source of Funds Business Income Investment Returns Loan Others					
Currency Amount 1 MOP RMB HKD Others 2 MOP RMB HKD Others Cashier's Order / Cheque	Payment Method					
1 MOP RMB HKD Others 2 MOP RMB HKD Others Cashier's Order / Cheque	☐ Cash					
2 MOP RMB HKD Others Cashier's Order / Cheque	Amount					
Cashier's Order / Cheque						
Bank Location and Name Cashier's Order / Cl	Cashier's Order / Cheque					
	Cashier's Order / Cheque No.					
Bank Transfer						
Payer's Bank Location and Name Payer's Bank Account No. Beneficiary's Bank Location and Name Beneficiary's Bank Location and Name	Beneficiary's Bank Account No.					
2						
☐ Bank Financing						
Bank Location and Name Other No.	Other No.					
1						
2						
Others						
1						
2						
Part V (Additional Information)						
Signature: Guarantor (if any) Signature:						

Date:

(Note: This only applies when the signatory's identity is verified by guarantors. Verification of identity through guarantors or personal knowledge should not be admitted when there is suspicion that the transaction is related to the crime of money laundering or of financing of terrorism.)