

ALL MEMBERS ARE REQUIRED TO COMPLETE THIS SECTION:

Politically Exposed Persons (PEP)/Public Figures:

Do you, any immediate family or close associates, currently serve or previously served in the capacity of an official/senior official in the administrative, legislative or executive division of the government, military or judiciary of your country of residence or in any other foreign country government?

Yes No

Do you, any immediate family or close associates, currently serve or previously served in the capacity of assistant commissioner or higher of the police force or as a senior executive of a state owned company of your country of residence or a foreign government?

Yes No

If you have ticked "Yes" to any of the above, please state the capacity? _____

Authorisation, Declaration and Consent:

I understand that the information provided in this form will enable Guardian Life Limited to manage operations and risks and allow for the enhancement of customer experience. I further comprehend that the information provided may be used to appease information requests of the regulators or in order to satisfy legal or regulatory requirements. I confirm that the information provided is true and correct and can be relied upon by Guardian Life and hereby grant permission for the usage of the information for the purposes herein stated or as may be required from an operational standpoint.

I agree that my client data may be shared with Guardian Life's group corporate structure which includes its parent company, subsidiaries, associated and affiliated companies as well as with credit bureaus and regulators in and outside of the jurisdictions in which Guardian Life operates.

Signed at: _____ this _____ day of _____ 20 _____

Signature of Member: _____

Name of Witness: _____

Signature of Witness: _____

For Official Use: Index by Member ID, TRN and Member Name