

Declaration Senior Management listed company and additional information

The undersigned

Name of organisation	<input type="text"/>
Chamber of Commerce number	<input type="text"/>
Legal form	<input type="text"/>
Place of establishment	<input type="text"/>

1. Details Senior Management

1	Given name(s) in full	<input type="text"/>
	Surname prefix(es)	<input type="text"/>
	Surname at birth	<input type="text"/>
	Date of birth	<input type="text"/>
	Country of residence	<input type="text"/>
2	Given name(s) in full	<input type="text"/>
	Surname prefix(es)	<input type="text"/>
	Surname at birth	<input type="text"/>
	Date of birth	<input type="text"/>
	Country of residence	<input type="text"/>
3	Given name(s) in full	<input type="text"/>
	Surname prefix(es)	<input type="text"/>
	Surname at birth	<input type="text"/>
	Date of birth	<input type="text"/>
	Country of residence	<input type="text"/>
4	Given name(s) in full	<input type="text"/>
	Surname prefix(es)	<input type="text"/>
	Surname at birth	<input type="text"/>
	Date of birth	<input type="text"/>
	Country of residence	<input type="text"/>

2. Further information on your organisation / supplementary question

Finally, please answer the following questions.

1. What precisely are your organisation’s business activities?

Three horizontal lines for text input.

2. In which countries is your organisation active?

Three horizontal lines for text input.

3. In which countries are companies in your group active?

Three horizontal lines for text input.

4. If you have indicated in question 2 and/or question 3 that you do business in a region that includes multiple countries, could you specify whether you do business with the countries listed below? Please check the countries that apply. If you do not do business in any of the countries listed below, please check “None of the above”.

- Belarus
- Cuba
- Iran
- North Korea
- Russia
- Sudan
- Syria
- None of the above

3. Declaration and signature

The undersigned hereby declare that all information provided is truthful, also on behalf of:

- the other directors (if any) of the aforementioned legal entity,

1 Name _____

Country of residence _____

Date

Place _____

Signature _____

2 Name _____

Country of residence _____

Date

Place _____

Signature _____

It may be that we require additional information from you. In that case, we will contact you. Please contact us if you have any questions.