SACH FINANCIAL SOLUTIONS

ANTI-MONEY LAUNDERING (AML) & COUNTER-TERRORIST FINANCING (CTF) DECLARATION

STRICTLY PRIVATE & CONFIDENTIAL

CLIENT INFORMATION

Information	Details
Full Legal Name	_____
Date of Birth	_____
Nationality	_____
Passport / National ID Number	_____
Residential Address	_____
City / Country	_____
Email Address	_____
Mobile Number	_____
Occupation	_____
Employer / Business Name	_____
Trading Account Number	_____
Date	_____

SECTION 1

PURPOSE OF THIS DECLARATION

SACH Financial Solutions is committed to maintaining the highest standards of integrity and compliance with applicable Anti-Money Laundering (AML), Counter-Terrorist Financing (CTF), and financial crime prevention regulations.

This declaration enables SACH Financial Solutions to verify the legitimacy of client funds and ensure compliance with international regulatory standards.

SECTION 2

SOURCE OF WEALTH

Please indicate the primary source of your accumulated wealth.

☐ Employment Income

☐ Business Ownership

☐ Investments

☐ Property Sale

☐ Rental Income

☐ Inheritance

☐ Gift

☐ Pension

☐ Family Office

☐ Trust Distribution

☐ Cryptocurrency Investments

☐ Other

Please Specify:

SECTION 3

SOURCE OF INVESTMENT FUNDS

Please specify the origin of the funds intended for investment.

☐ Personal Savings

☐ Business Profits

☐ Investment Liquidation

☐ Salary

☐ Property Sale

☐ Dividend Income

☐ Loan Proceeds

☐ Family Wealth

☐ Other

Details

SECTION 4

POLITICALLY EXPOSED PERSON (PEP)

Are you currently or have you ever been a Politically Exposed Person (PEP)?

☐ Yes

☐ No

If Yes

Position Held : _____

Country : _____

Relationship (if applicable)

SECTION 5

SANCTIONS & LEGAL STATUS

Please answer the following questions.

	Question	Yes	No

Have you ever been convicted of a financial crime?	☐	☐
Are you currently under investigation by any regulatory authority?	☐	☐
Are you subject to international sanctions?	☐	☐
Have you ever been charged with money laundering or fraud?	☐	☐
Have you been refused banking services due to compliance concerns?	☐	☐

If any answer is **Yes**, please provide full details.

_____

_____

_____

SECTION 6

EXPECTED ACCOUNT ACTIVITY

Estimated Initial Investment USD _____

Expected Monthly Trading Volume USD _____

Expected Annual Investment USD _____

Expected Number of Deposits Per Year _____

Expected Number of Withdrawals Per Year _____

_____

SECTION 7

TAX RESIDENCY

Country of Tax Residence : _____

Tax Identification Number (TIN) : _____

Are you a U.S. Citizen or Tax Resident?

☐ Yes

☐ No

SECTION 8

CLIENT DECLARATION

I hereby declare and confirm that:

□ The information provided in this declaration is complete, accurate, and true.

□ The funds invested with SACH Financial Solutions originate from legitimate and lawful sources.

□ I am the beneficial owner of the funds unless otherwise disclosed.

□ None of the funds are derived from criminal activity, money laundering, terrorist financing, tax evasion, fraud, corruption, or any unlawful conduct.

□ I agree to provide supporting documentation upon request.

□ I understand that SACH Financial Solutions may decline or terminate its relationship with me if any information supplied is found to be false or misleading.

□ I authorize SACH Financial Solutions to conduct identity verification, sanctions screening, politically exposed person (PEP) screening, and other due diligence checks as required by applicable laws and regulations.

SECTION 9

SUPPORTING DOCUMENTS

Please attach copies of the following documents where applicable.

☐ Passport / National ID

☐ Proof of Residential Address

☐ Bank Statement

☐ Source of Funds Evidence

☐ Source of Wealth Documentation

☐ Tax Identification Document

☐ Company Registration Documents (if Corporate)

☐ Other Supporting Documents

SECTION 10

CLIENT CONSENT

I acknowledge that SACH Financial Solutions may verify the information contained in this declaration with regulatory authorities, financial institutions, or approved third-party verification providers where legally permitted.

I further understand that failure to provide satisfactory information may result in delays, suspension of services, or termination of the business relationship.

CLIENT CERTIFICATION

Client Name : _____

Client Signature _____

Date _____

FOR OFFICIAL USE ONLY

Item	Details
AML Review Completed By	_____
Compliance Officer	_____
Date Reviewed	_____
Risk Rating	☐ Low ☐ Medium ☐ High
Enhanced Due Diligence Required	☐ Yes ☐ No
Approved	☐ Yes ☐ No
Remarks	_____

CONFIDENTIALITY NOTICE

This document contains confidential information intended solely for regulatory compliance and client due diligence purposes. SACH Financial Solutions will process all personal information in accordance with applicable data protection and privacy laws.