AU Precious Metal Solutions

U.S.A. Patriot Act/AML Program

General Information		
Company Name*:		
Address*:		
City*:	State*:	Zip*:
Country: USA		
Telephone*:	Fax	:
Email*:		
Website Address*: http://		
Previous Address:		
(if moved in last 5 years):		

Parent Company Informa	ation (skip if N/A)
Name of Parent Company:	
City:	State:
Country: USA	

TTAUE ASSUCIACIONS	Trad	e A	Associations
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Please Choose Any associations you are a member of:

(ctrl + click to select multiple) Other:

Form Type:	Individual		Corporate		
Company	Information				
	Type of Company*:		Proprietorship	LLC	Corporation
	Year Established:			Stat	:e:
	Federal ID*:				
(F	olease provide copy)				
Nan	nes of Key Officers*:				
	Type of Business*:				
Doe	s your company import		Yes	N	0
or exp	ort goods to/from US?				
Does	s your company have an		Yes, our compliance	e office	ris:
А	nti-Money Laundering		No		
	program in place?				
Bank Info	ormation				
	Bank Name*:				
	Address*:				
	City*:			S	tate:
	Country: l	JSA			
	Telephone*:				
	Account #:				
	Bank Contact:				