CONFIRMATION OF VERIFICATION OF IDENTITY PRIVATE INDIVIDUAL

INTRODUCTION BY AN FSA-REGULATED FIRM

1 DETAILS OF INDIVIDUAL (see explanatory notes below)

2

Full name of Customer	MR SIMON RAFIQ MARFANI	
_		
Current Address	S MERSCY MERCOSS Previous address if individual has changed address in the last three months MANCHESTER	
	INHVUTES IVE	
	M20 2GB	
Date of Birth	24/08/67	
CONFIRMAT	ION	
I/we confirm that		
(a)	(a) the information in section 1 above was obtained by me/us in relation to the customer;	
(b)		
	[tick only one]	
	meets the standard evidence set out within the guidance for the UK Financial Sector issued by JMLSG; or	
	exceeds the standard evidence (written details of the further verification	
	evidence taken are attached to this confirmation).	
Signed:	MUNTEL	
Name:	LMSULTER	
Position:	SAIS SUDPOUT (AUSULTION)	
Date:	151210	

3 DETAILS OF INTRODUCING FIRM (OR SOLE TRADER)

Full Name of Regulated Firm (or Sole Trader):	Northern Assurance Buildings / Louis Eduare
FSA Reference Number:	Manchester M2 4DN

Tel: 0161 832 6413 Fax: 0161 834 2230

FSA No. 134190