

Individual Customer Questionnaire

Tell Us About Yourself	
	Citizenship Status (check one) US Citizen Resident Alien* Non-Resident Alien*
Name:	OS CITIZEN
SSN/ITIN:DOB:	Country of Citizenship:
Physical Address:	Resident Alien ID# (for non citizens)
(No PO Boxes) City/State/Zip:	Country of Residence:
Employer:	ID type: ID#: Exp:
Occupation:	Phone
Occupation Occupation	
industry Code:	Home Phone: Cell Phone:
	Email Address
Position/Title:	Email Address:
Do you travel outside the US frequently?	How did you hear about us?
If yes, which countries?	
Additional Due Diligence Information	
Additional Due Dingence information	
Are you currently or have ever been a foreign political	Yes If yes, STOP. Obtain necessary approvals prior to opening
figure?	□ No
	Yes <i>If yes, STOP.</i> Obtain necessary approvals prior to opening
Are you related to a foreign political figure?	No
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And the second in many interest and business	Ves. 16 ves. STOR. Obtain accessory appropriate angles.
Are you engaged in marijuana-related business activities (production, transportation or sales)?	Yes <i>If yes, STOP.</i> Obtain necessary approvals prior to opening No
detivities (production, transportation or sures).	
Is there an interpreter or someone else speaking on	_
behalf of the customer?	Yes If yes, enter name and SSN of the interpreter in comments
	∐ No
By signing below, I certify that the information provided is true and correct; furthermore, I authorize American National Bank to verify my information by any means necessary, including preparation of a credit report by a credit reporting agency.	
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Signature of individual (or authorized representative)	 Date
Signature of maintaudi (or dutilonized representative)	
Bank Use Only: OIE: PSA Approval if required to open account:	
	ired to onen account :
	ired to open account :
CIF: BSA Approval, if requ	· · · · · · · · · · · · · · · · · · ·
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