Name of Company:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For the Year: \_\_\_\_\_\_\_\_\_\_\_

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| Name in Alphabetical Order  (Last Name, First Name and Middle Name) | Type of Registration/  License | Certificate of Registration Number | Taxpayer Identification Number | Complete Residential Address | 1x1 Recent ID Picture  (taken within the last 6 months) | Signature |
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Certified Correct:

Associated Person/Compliance Officer (Signature over Printed Name)