



## BENEFICIAL OWNERSHIP ADDENDUM

### MERCHANT APPLICATION INFORMATION

Merchant Legal Name:	Mailing Address:
Merchant DBA Name:	Physical Address:

This Beneficial Ownership Addendum shall be attached to and made a part of the original Merchant Agreement between Westamerica Bank and the undersigned.

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

By signing below, I attest that I have accurately provided the name, address, date of birth and Social Security Number (SSN) for the following individuals (i.e. the beneficial owners):

- (i) Each individual, if any, who owns directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); AND
- (ii) An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

### BENEFICIAL OWNERS OF THE BUSINESS – SECTION 1 (NO P.O. BOXES)

First Name	Last	SSN	Percent Owner	Title
Residence Address	City	State	Zip	Phone
E-Mail		Gov't Issued ID #	Issued By	Exp. Date

  

First Name	Last	SSN	Percent Owner	Title
Residence Address	City	State	Zip	Phone:
E-Mail		Gov't Issued ID #	Issued By	Exp. Date

  

First Name	Last	SSN	Percent Owner	Title
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First Name	Last	SSN	Percent Owner	Title
Residence Address	City	State	Zip	Phone:
E-Mail		Gov't Issued ID #	Issued By	Exp. Date

### MANAGEMENT RESPONSIBILITY / INDIVIDUAL WITH SIGNIFICANT CONTROL – SECTION 2 (NO P.O. BOXES)

First Name	Last	SSN	Percent Owner	Title
Residence Address	City	State	Zip	Phone
E-Mail		Gov't Issued ID #	Issued By	Exp. Date

I, (print name) \_\_\_\_\_, hereby certify, to the best of my knowledge, that the information provided on this form is complete and correct for all accounts. It is further agreed that Westamerica Bank will be immediately notified by the legal entity of any change in such information provided on this form.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_