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|  | **BO2****ANNUAL CONFIRMATORY****BENEFICIAL OWNERSHIP(BO)****DECLARATION FORM** | **IN ACCORDANCE WITH THE COMPANIES AMENDMENT ACT NO.4 OF 2023, CLOSE CORPORATION AMENDMENT ACT NO. 5 OF 2023 & FINANCIAL INTELLIGENCE ACT 2012**  |

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| ***COMPLETE FORM WITH BLACK INK IN BLOCK LETTERS – NO ABBREVIATIONS*** |
| **PART A – ENTITY PARTICULARS** |
| 1. **ENTITY INFORMATION**
 |
| 1. **FULL LEGAL NAME OF ENTITY:**
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|  |
| 1. **ENTITY REGISTRATION NUMBER:**
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**DECLARATION****1**. **I, UNDERSIGNED, FOR AND ON BEHALF OF THE REPORTING ENTITY CONFIRM THAT, ALL INFORMATION PROVIDED PREVIOUSLY, REMAIN THE SAME AND IS ACCURATE, ADEQUATE AND UP TO DATE.** **NAME OF DIRECTOR/SHAREHOLDER/MEMBER/BENEFICIAL OWNER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **[DELETE WHERE NOT APPLICABLE]**

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 **SIGNATURE: DATE (DDMMYYYY):**  |
|  |

**OR**

1. **I, UNDERSIGNED, FOR AND ON BEHALF OF THE REPORTING ENTITY CONFIRM THAT TO THE BEST OF MY KNOWLEDGE ALL**

**INFORMATION PROVIDED PREVIOUSLY REMAIN THE SAME AND IS ACCURATE, ADEQUATE AND UP TO DATE.**

**NAME OF ACCOUNTABLE INSTITUTION:**

**POSITION:**

|  |  |  |  |  |  |  |  |
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***\*IN THE CASE OF AN EXTERNAL COMPANY THE LOCAL MANAGER SHOULD SIGN*.**

**NAME OF AUTHORISED STAFF:**

**DATE (DDMMYYYY)**:

**SIGNATURE:**

**OFFICIAL USE ONLY** [**TO BE COMPLETED BY BIPA OFFICIAL]**

**NAME OF REGISTRATION OFFICER**:

|  |  |  |  |  |  |  |  |  |
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**SIGNATURE:**

**DATE (DDMMYYY):**