

URGENT ATTENTION REQUIRED

I am writing to you to inquire whether you have instituted an anti-money laundering (AML) program in compliance with the USA PATRIOT Act, the U.S. Bank Secrecy act and other regulatory requirements. In order to complete our compliance obligation, we are required under our policy and program to acquire the following identifying information for all our business partners and customers. You may complete this form and fax it back to the following number: (516) 482-6250.

Registered Na	me:	
Trading Name	(if different):	
Director or Pre	sident:	
Address:		
	mber:	
Fax number:		
E-Mail address:		
Website:		
	on number:	
Resale certifica	ate number:	
Government lic	cense number:	
YES	We have or will be instituting an AML Program.	
	We will not institute an AML program due to our statu "exempt" retailer. (print name)	
	ve is true and correct.	
Signed:	ON	