Financial Counseling Services LTD.

ORDER FORM – UK LIMITED COMPANY

COMPANY NAME

Some sensitive words may not be used in the name of a UK Limited Company without prior written approval by the Secretary of State. Normally, such sensitive words would include: Assurance, Bank, Charity, Chamber of Commerce, Chartered, Cooperative, Insurance, Mutual, Police, Trust, Royal, or any words of similar meaning, as well as any words that suggest patronage of the British Royalty or the Government of the UK. The name of a private company limited by shares shall end with the word "Limited" or "Ltd".

-❼ New registration: 1st choice .....
2nd choice .....
3rd choice .....

DIRECTORS

Appoint the following as Director(s) :

1) Full Name .....
Residential Address .....
Nationality .....
Occupation .....
(Please explain what you do for a living)
Provide Passport copy
Or ID .....

2) Full Name .....
Residential Address .....
Nationality .....
Occupation .....
(Please explain what you do for a living)
Provide Passport copy
Or ID .....

SHAREHOLDERS

1) Ownership in the Company .....%
Full Name .....
Residential Address .....
Nationality .....
Occupation .....
Mother's maiden name.....
(Please explain what you do for a living)

Provide Passport copy
or ID ……..
Reg. Number ……. (Only if corporate body)

2) Ownership in the Company ……%
Full Name .....
Residential Address .....
Nationality .....
Occupation ……
Mother's maiden name……
(Please explain what you do for a living)
Provide Passport copy
or ID ……..
Reg. Number ……. (Only if corporate body)

3) Ownership in the Company ……%
Full Name .....
Residential Address .....
Nationality .....
Occupation ……
Mother's maiden name……
(Please explain what you do for a living)
Provide Passport copy
Or ID ……..
Reg. Number ……. (Only if corporate body)

Contact details

Full Name ..... Ownership in the Company ……%

Nationality …….. Date of birth ……

Residential address ……

Business address ……

Occupation …… Email address ……
(Please explain what you do for a living)

Telephone No. …….. Fax No. ……..

DID SOMEONE REFER YOU TO US?

If yes, please indicate who referred you to us?

……

(!) Please provide a passport copy and an original proof of address for each individual listed in this Order Form. A proof of address should be any recent original document no later than three months old where the name and residential address of the person is indicated. A recent credit card or bank statement, utility bill, landline telephone bill or other similar document is suitable as a proof of address. Depending on the circumstances of your order, you may be asked by our Compliance Manager to provide additional identifying documents or information. Any personal information and documents you provide to us will remain confidential and will NOT become part of any public record.

Please send to us:

- € this Order Form, completed and signed
- € Documents, as indicated above

Dated: Signed by:
…….

Signature:
……..