Self-certification

for the purpose of the automatic exchange of financial information under Art. 142t, para. 1 of the Tax and Social Security Procedure Code (TSSPC) from

First name			Mid	Middle name				Last name					
	esidence ad	ldress											
Country:								D: -4: -4.					
City or town:						District:			N	F1	1	De et Ce 1	
Street:									No:	Floor:	Apt.:	Post Code:	
	ate and pla	ce of b	irth			1							
Date of birth						Place of birth							
Day	Month	Year				Country:	ountry:	•	City or town:				
Part 4. Ci	itizenship												
Citizensh	iip:												
If the Acc	count Holde	er has n	nore tha	an one	citizens	hip (including gre	een card	in the case	of USA)	, please ma	rk with "	·X"	
and list in	n the field b	elow a	ll count	ries of	which t	he Account Holde	er is a cit	izen.					
Other citi	izenship:												
Part 5. Ju	ırisdiction	of tax	residen	ce and	l Tax Id	entification Nun	nber (TI	N)					
Jurisdicti	on of which	the A	ccount 1	Holder	is a res	ident for tax purp	oses:						
Tax Identification Number issued by that Jurisdi						etion:							
	official nur					please fill in Uni	fied Civ	il Number	(UCN), I	Personal N	imber of	a Foreigner	
	the Accou					of more then or	ne Juris	diction, pl	ease fill	in informa	tion for	each Jurisdict	
		-				s a resident for tax	x purpos	es:					
City or to	NIV.							District:					
						District.	NT.	F1	T &	D 1			
Street:									No:	Floor:	Apt.:	Post code:	
m *:													
Tax Ident	tification N	umber	issued b	by that	other Ju	irisdiction:							
Other infe	ormation:												

I declare that the provided information is true, correct, complete and submitted voluntarily. I undertake the obligation to inform immediately the Financial Institution in writing in case of any change to that information and to provide any other data or documents, if necessary.

I agree the Financial Institution to process, store, use and disclose my personal data to third parties in cases provided by law and I confirm that I have received the information under Art. 19, para. 1 of Personal Data Protection Act.

I declare that I am notified about the possibility the information under Art. 142b of TSSPC containing my personal data, account balance or value as well as the derived income to be subject to automatic exchange of financial information under chapter sixteen, section IIIa of the TSSPC and to be reported to the Jurisdiction/s of which I am a tax resident in pursuance of the international commitments of the Republic of Bulgaria.

I am aware of the penal liability under Art. 313 of the Penal Code for declaring of false information.

Date: Signature: