



JAKA Securities Corporation

CUSTOMER ACCOUNT INFORMATION

Name: _____ Age: _____ Sex: _____

Date of Birth: _____ Birth Place: _____ Nationality: _____

Civil Status: _____ Name of Spouse: _____

SSS: _____ TIN: _____ Driver's License: _____

Res. Address: _____ Res. Tel. No.: _____

Bus. Address: _____ Bus. Tel. No.: _____

Occupation: _____ E-mail Address: _____

Annual Income: [] Below 1M [] 1M – 5M [] 5M – 10M [] 10M – 20M [] 20M – Above

Net Worth: [] Below 5M [] 5M – 10M [] 10M – 20M [] 20M – 30M [] 30M – Above

Account Type: [] Cash [] Personal [] Margin
[] Discretionary [] Institutional

Investment Objective:
[] Speculation [] Growth
[] Preservation of Capital [] Long Term Investment

Are you an office or director of a listed company?
[] Yes [] No If, yes, state the name of the company and position
Company Name Position

Do you have accounts with other broker or dealer?
[] Yes [] No If, yes, state the name of broker(s)?
Company Name Company Name

For Corporate or Joint Account, indicate names of person authorized to transact on behalf of the company/individual

*For Corporate account. Pls. submit the following documents; I. (SEC) Registration; II Secretary's Certificate on Authorized Signature

Name	Signature
_____	_____
_____	_____
_____	_____

If opened and maintained by a representative, state the name and address of beneficial owner

Name	Signature
_____	_____
_____	_____
_____	_____

For Discretionary Acct.

_____	_____
Signature of person authorized to Exercise discretionary	Date discretionary is granted
_____	_____
Customer's Signature	Salesmand and officer's Signature

All Information are valid and true:

_____	_____
Customer's Signature	Date
_____	_____
Authenticated by:	Date
JAKA Securities Corporation	