



**Cipher Recover Ltd. (the "Company")**

**KYC Questionnaire**

**Client Identification Form**

**Part 1**

**Individual Client identification details**

1	Full name	
2	Date of birth	
3	Place of birth	
4	ID or passport number	
5	Phone number	
6	Email address	
7	Physical address	
8	Country of residence	
9	Occupation	
10	Photo/scan of governmental issued ID or passport	
11	Copy of utility bill	
12	Photo of yourself holding your ID or passport	
13	Proof of bank account management. What is the purpose of the activity in the account?	
14	What is the source of your funds and assets?	
15	What is your relation to Israel?	



16	<p>Are you a resident of Israel?          If the answer is no, are you considered a "public figure"?</p> <p><input type="checkbox"/> Yes  <input type="checkbox"/> No</p> <p>If the answer is yes, please select a job title below that best describes your occupation:</p> <p><input type="checkbox"/> Head of State  <input type="checkbox"/> President of State  <input type="checkbox"/> Mayor  <input type="checkbox"/> Judge  <input type="checkbox"/> Member of Parliament  <input type="checkbox"/> Member of government  <input type="checkbox"/> Senior military officer  <input type="checkbox"/> Senior police officer  <input type="checkbox"/> Another senior public office _____          (please specify)</p>	
17	<p>Is a relative of yours considered a "public figure"?</p> <p><input type="checkbox"/> Yes  <input type="checkbox"/> No</p> <p>If the answer is yes, please select a job title below that best describes his/her occupation:</p> <p><input type="checkbox"/> Head of State  <input type="checkbox"/> President of State  <input type="checkbox"/> Mayor  <input type="checkbox"/> Judge  <input type="checkbox"/> Member of Parliament  <input type="checkbox"/> Member of government  <input type="checkbox"/> Senior military officer  <input type="checkbox"/> Senior police officer  <input type="checkbox"/> Another senior public office _____          (please specify)</p>	

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**CIPHER  
RECOVER**  
RECOVER WHAT'S YOURS

## **Part 2**

### **Declaration of the Client filling out the form:**

I hereby declare that the details specified above were filled out by me and that they are true and accurate to the best of my knowledge. I undertake to notify about any change to said details, should such occur, at the earliest opportunity. If the information specified above is found to be false or misleading, I am aware that I may be held liable in respect whereof. I agree and I am aware that the Company shall keep a copy of this form.

Date \_\_\_\_\_ Client signature \_\_\_\_\_