

**COMPANY :**.....

**Personal file to submit for auditors :**

*You must submit a complete personal file for all the persons conducting audits or signing audit reports (MLA and CoD).*

**Information relating to the person :**

Date of birth : .....Nationality : .....

Home address : .....

.....

Joined the company since (date) :.....

Signatory powers :     **yes** /  **no**      Expert-auditor :     **yes** /  **no**

**Please provide with the following documents :**

- photocopy of a valid passport or identity card, countersigned by the person concerned;
- photocopy of residence authorisation (for foreigners domiciled in Switzerland) or of work authorisation (for frontier workers), countersigned by the person concerned;
- original extract of the criminal records of the country of residence, not older than six months;
- *curriculum vitae* in original form, dated and signed by the person concerned, containing at least his civil status, his private address, his education and his professional career. (If undated, the document is deemed to be dated of the day of its receipt by the secretariat) ;
- simple copy of diplomas \*
- simple copy of certificates of employment \*

*\* or, failing this, a written, dated and undersigned attestation on honour explaining this default*

Please certify, by signing the present paragraph, that neither in Switzerland, nor abroad:

- you have ever been condemned or are presently the subject-matter of any proceedings of a criminal or disciplinary character, regardless of whether they are of a judicial or administrative nature, due to facts in connection with your professional activity (e.g. prohibition or withdrawal of the authorization to exercise a professional activity, exclusion from a SRO etc.) or due to acts constituting a crime within the meaning of Swiss law;
- the impeccable management of the undertakings of which you have been the employee or body has ever been called into question by a financial market supervisory authority (e.g. FINMA, SFBC, SRO and equivalent foreign authorities) due to acts attributable to you.

Name: ..... First name: .....

For certification of the above: (place, date, signature)

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In the case of any facts, acts, proceedings or convictions which could not be entirely compatible with the certification stated hereinbefore or could be relevant in an economical respect or from the point of view of the reputation or the guarantee of the impeccable management of a bank or of a securities dealer, we ask you to indicate their content precisely and to provide all documents as well as means of information allowing an accurate assessment of their impact.