

OGF Online Ltd.

P.O. Box 3321, Road Town, Tortola, British Virgin Islands
internet: <http://www.ogfonline.com>, email: info@ogfonline.com

Account Number:

Representative:

Account Application

Personal Information

Account Holder (Individual, Corporation, or Trust)

Authorized Person

Code Word

Authorized Person (if Joint Applicant)

Code Word (Joint Applicant)

Address

City

Province/State

Country

Postal Code/ZIP

Telephone

Facsimile

Telephone (Joint Applicant)

E-mail

All account information is provided online. Please check if you wish to have correspondence mailed to an alternate address below:

Address

City

Province/State

Country

Postal Code/ZIP

Investment Information

Low Volatility – Capital Preservation _____ % (safety of principal and income through investing in CDs, GICs, savings bonds, etc.)

Medium Volatility – Moderate Growth _____ % (through investing in bond funds, preferred stocks, and blue chip mutual funds)

High Volatility – Short Term Trading _____ % (short term appreciation through aggressive investing in options, stocks, etc.)

Total should equal 100% _____ %

Insider Declaration

I am an Officer or Director of a publicly traded issuer. If yes, please specify:

I singularly or as part of a group control more than 10% of the votes of a publicly traded issuer. If yes, please specify:

Beneficiary

The person named below is hereby designated as my beneficiary, entitled to receive all proceeds from this account upon my death, appropriately confirmed by legal verifiable documentation. I understand I may change my beneficiaries at any time.

Name and Relationship

Date of Birth

Secondary beneficiary effective in the event the primary beneficiary pre-deceases the secondary beneficiary.

Name and Relationship

Date of Birth

Reference

Bank Name and Account Number:

Bank Telephone

Which of our representatives are you dealing with?

Who do you currently invest with?

Certification

I certify that the information provided by me in this application is true and complete and I agree to advise you immediately of any material change in the information. I further certify that I am capable of evaluating and bearing the financial risk inherent in buying and selling securities and that trading, in all transactions for which approval is sought, is suitable for the purposes of my investment objectives. I agree to the terms and conditions set out in the Client Account Agreement attached.

Signature, Authorized Person

date

(if corporate, please affix seal)

Signature, Co-Authorized Person

date

(if joint account)

Documents

IMPORTANT: Please include the following with your Account Application:

Individual Applicants – copy of the Authorized Person(s) passport or drivers license with photo, one bank reference letter for each Authorized Person addressed “to whom it may concern,” and details on the wire transfer used to open your account (please use Wire Transfer Instructions Form).

Corporate Applicants – in addition to the above, please include a completed, signed, and sealed Corporate Resolution, and a copy of the corporation’s Certificate of Incorporation, first page of Memorandums and Articles of Association, and issued Share Certificates.

