



**OTP Voluntary Health and Mutual Fund**  
 Bank account number: 11703006-20411440  
 Tax number: 18105564-2-41

## Beneficial owner declaration for the representative of the employer member/contributor

For the representative of the employer member/contributor, for executing the task stipulated by Sections 8-9 of Act LIII of 2017

Please fill in the declaration in block capital letters; data marked in bold are mandatory; please mark the appropriate boxes with an X.

### 1. Employer's Declaration

I, the undersigned ..... (representative of the client .....) declare, in accordance with Sections 8(2) and 9(1) of Act LIII of 2017 on the Prevention and Combating of Money Laundering and Terrorist Financing (hereinafter: AML Act), that in connection with the contract .....

I act in my own name or on behalf of the client represented by me, or

I act on behalf of the following natural person who is the beneficial owner

If I act on behalf of another person who is the beneficial owner, I certify the following data regarding the beneficial owner:

Last name and first name: .....

Last name and first name at birth: .....

Place and date of birth: .....

Nationality: .....

Address: .....

For foreigners, place of residence in Hungary: .....

Type and extent of ownership interest: .....

Place and date: .....; ..... 20...

Client's representative: .....