SCHEDULE B

MFSA

MALTA FINANCIAL SERVICES AUTHORITY

PERSONAL QUESTIONNAIRE

FOR PROPOSED OFFICERS OF RECOGNISED INVESTMENT EXCHANGES

Name of proposed officer	
Name of Recognised Investment Exchange	

Please return this form to: Malta Financial Services Authority Attard for the attention of the appropriate Regulator

PERSONAL QUESTIONNAIRE

Please read the questions carefully before completing this form. All questions should be answered and the completed form should be signed at the appropriate place on the last page. The Completed Form should be returned to the MFSA at the address shown on the cover sheet. If more space is needed to answer any question please add continuation sheets at the back of this document. Please label continuation sheets clearly. Answers should be written in ink in **BLOCK CAPITALS**.

The areas covered in this questionnaire are not exhaustive of the matters that the MFSA will consider in assessing whether a person is 'Fit and Proper' - which is an ongoing requirement and therefore subject to ongoing assessment. The MFSA reserves the right to seek information and references from organisations and individuals named in this Questionnaire and elsewhere both at the time of submission of this form and at any time thereafter. It is therefore important that **full names and addresses** are provided.

If you are in any doubt about how any of the questions should be answered, please contact the appropriate Regulator at the MFSA on 21441155.

PLEASE NOTE THAT IF ALL QUESTIONS ARE NOT ANSWERED, THIS FORM WILL BE RETURNED.

1	Name of Exchange	in connection	with which this	anectionnaire is	being completed
1.	Ivanie of Exchange	meetion	with winch una	s questionnane is	being completed.

2.	Your surname	
	Forename(s)	
	Maiden Name (if applicable)	
	Any previous name(s) by which you have been known	

- **3.** In which capacity are you completing this questionnaire? (for example:- as a director or a controller or a senior manager or as a Company Secretary? If other, please specify.)
- **4.** Current Private Address including Post Code **4.1.0**: Address: if applicable. (*Please include the date when you took up residence at this address*).

4.1.1: Date:

5.	Previous private addresses during the last ten	5.1.0 : Address:	
	years		
		5.1.1 : Date from:	Date to:
		5.2.0 : Address:	
		5.2.1 : Date from:	Date to:
		5.3.0 : Address:	
		5.3.1 : Date from:	Date to:
		5.5.1 . Dute 110111.	Duce to.

6.		and	place	of	birth	(including	town or	6.1 : Date:
	city)							6.2 : Place:

7.	Nationality and how it was acquired (birth, naturalisation, marriage).	7.1: Nationality:
	(If your nationality has changed, please	7.2: How Acquired:
	confirm - advising when it was changed and what it was previously).	

8. Current associateship, membership or fellowship of professional bodies and year of admission. Associate Year of Associate-Professional Body Full Address of Admission ship/ Professional Body (A), Member Membership/ $(M) \ or$ Fellowship Number Fellow (F)?

ii

8.1				
			Phone	Fax
8.2				
			Phone	Fax
8.3				
			Phone	Fax

9.	Please list aca concerned - inc	-	-	signifying	the year	granted an	nd the	University/Institut	ion
	Degree (DE) or Diploma(DPL)?	0 2	Year Granted	University		Full Addres	s of Univ	versity/Institution	

	Diploma(DPL)?	Letters	Granted		
9.1					
				DI	r.
				Phone	Fax
9.2					
				Phone	Fax
9.3					
				Phone	Fax

Please attach to this form, a precise description of the qualifications attained and a certified true copy of the diploma or degree awarded.

Respondents who have obtained qualifications from the University of Malta should attach to this P.Q. a copy of a letter which should be sent to the Registrar of the University of Malta granting authorisation to disclosure of any information which MFSA may request.

10. Please list any other qualifications that you have attained together with the appropriate date and the name of the Sponsoring Body (e.g. MITC or Securities Institute). Please also supply contact name, address, certificate number etc.

	Date	Qualification	Sponsoring Body
10.1			
10.2			
10.2			
10.3			

11.	Please list any other skills or specific training you have had (<i>not already mentioned elsewhere</i>) that is relevant to the business of the exhange named in No. 1 above.						
	Date	Training	Provided by				
11.1							
11.2							
11.3							

12 Present occupation or employment and occupations and employment during the last ten years (going from most recent to most dated), including the name of the employer, the nature of the business, the position held and relevant dates.

	Dates	Title	Employer	Full Address		
12.1						
				Phone	Fax	
12.2						
				Phone	Fax	
12.3						
				Phone	Fax	

13.	Name any bodies	corporate and	the countries in	which they	are registered:-

- (a) of which you are currently a director, secretary, controller or manager; and
- (b) of which you have been a director were previous, secretary, controller or manager at any time during the last ten years.

	Name of Company	Current (C)	Country of Incorporation
13.1		Previous (P)	
13.1			
13.2			
13.3			

14. Have you at any time been convicted of any offence by any court? If so, give full particulars of the court by which you were convicted, the offence and the penalty imposed and the date of conviction. If the answer to 14.1 is negative, please proceed to No. 15. (Parking and Speeding offences should not be listed).

14.1	YES/NO (Please delete as appropriate)
14.2	COURT:-
14.3	OFFENCE:-
14.4	PENALTY:-
14.5	DATE:-

- **15.** Have you or any body corporate, partnership or unincorporated institution with which you are, or have been, associated as director, controller or manager ever been censured, disciplined or publicly criticised by any Court of Law, regulatory authority, officially appointed enquiry or by any professional body or trade association to which you may or may not have belonged or do belong?
- **15.1** YES/NO (Please delete as appropriate). If so, give full particulars:-
- **16.** Have you or any body corporate, partnership or unincorporated institution with which you are, or have been, associated as director, controller or manager ever been the subject of a regulatory order or been refused or had revoked a licence or equivalent authorisation to carry on a business activity? If so explain the circumstances thereof.
- 16.1 YES/NO (Please delete as appropriate). If so, give full particulars:-

- **17.** Have you, or any body corporate, partnership or unincorporated institution with which you are, or have been associated as a director, controller or manager, been the subject of an investigation by a governmental, professional or other regulatory body?
- 17.1 YES/NO (Please delete as appropriate). If so, give full particulars:-
- **18.** Have you, or any body corporate, partnership or unincorporated institution with which you are, or have been associated as a director, controller or manager withdrawn an application that had been submitted to a regulatory or licensing authority?
- **18.1** YES/NO (Please delete as appropriate). If so, give full particulars:-
- 19.
 Have you been dismissed from any office or employment or barred from entry to any profession or occupation?

 19.1
 YES/NO (Please delete as appropriate). If so, give full particulars:

20.	Have you been adjudicated bankrupt by a court?
20.1	YES/NO (Please delete as appropriate). If so, give full particulars:-

21.	Have you failed to satisfy any debt adjudged due and payable by you as a judgement debtor under				
	an order of a court?				
21.1	.1 YES/NO (Please delete as appropriate). If so, give full particulars:-				

22. Have you, in connection with the formation or management of any body corporate, partnership or unincorporated institution been adjudged by a court liable for any fraud, forgery or other misconduct by you towards such a body or company or towards any members thereof?
 22.1 YES/NO (Please delete as appropriate). If so, give full particulars:-

23. Has any body corporate, partnership or unincorporated institution with which you were associated as a director, controller or manager been compulsorily wound up or made any compromise or arrangement with its creditors or ceased trading in circumstances where its creditors did not receive or have not yet received full settlement of their claims, either while you were associated with it or within five years after you ceased to be associated with it?

23.1 YES/NO (Please delete as appropriate). If so, give full particulars:-

24. In carrying out your duties will you be acting on the directions or instructions of any other person? (The object of the question is to discover who - if anyone - controls what you do - e.g. a director reports to the Board).

24.1 YES/NO (Please delete as appropriate). If so, give full particulars:-

Financial Services Authority may seek references.

- 25. Are you presently, or do you, (other than in a capacity in which you are representing a third party), expect to be engaged in any litigation? For the purposes of this question, litigation of a purely personal nature that does not impinge on your solvency, competency or integrity (from a regulatory perspective) should not be listed.
 25.1 YES/NO (Please delete as appropriate). If so, give full particulars:-
- 26. Please provide the name, address and tel/fax numbers of one or more professional people, who are in a position to know of your business activities over the last 5 years or more and from whom the Malta
 - Please ensure that you contact the people you have named to advise them that the MFSA may contact them.

26.1 NAME

ADDRESS

Tel: Fax:

26.2 NAME

ADDRESS

Tel: Fax:

07/04/03

26.3	NAME
	ADDRESS
	Tel:
	Fax:

- 27 Please provide the name and address of your main banker. In doing so, please confirm how long you have been a customer of the bank and the name of the person there whom the MFSA may contact in the event of need. (In this respect, please contact your banker authorising him to disclose relevant information to the MFSA if required to do so. You may care to use the style of the attached draft which you should amend as appropriate).
- **28.** Please state whether and if so by whom you as an individual have been regulated (during the last ten years) in respect of any financial services activity. Starting with the most recent, please supply each Regulator's full name, address and any relevant reference.

	Date From	es To	Regulator	Add	ress	Relevant Reference/Contact
28.1	110m	10				References Connuct
				Phone	Fax	

Please also provide details of the Regulators (if any) of the Companies listed in response to Q. 13

	Date	?S	Regulator	Ada	ress	Relevant
	From	То				Reference/Contact
28.2						
				Phone	Fax	

29. Are you a director, senior manager or otherwise employed by a company licensed and regulated by the Central Bank of Malta under the Banking Act, 1994 or under the Financial Institutions Act, 1994 or under the Investment Services Act, 1994?

29.1 Please delete as appropriate

YES/NO

- **30.** With reference to Question 12, have you been dismissed from any of the positions described or asked to resign or agreed to resign instead of being dismissed?
- **30.1** YES/NO (Please delete as appropriate). If the answer is affirmative, please describe circumstances:-

31. <u>Declaration</u>

I certify that the above information is complete and correct to the best of my knowledge and belief. I undertake to advise the Malta Financial Services Authority of any material change. By signing the declaration below, I authorise MFSA to contact any or all of the above named or any other person considered by the MFSA to be relevant, both at the date of signature and at any time in the future unless and until I rescind this authority in writing.

Name of proposed of capitals)	fficer (in block	
Passport Number or alternatively I. D. Number		Place and date of Issue of Passport
Date		Signed

<u>An Officer</u> - includes a director, partner, chief executive, senior manager, company secretary or any person forming part of the governing body of an exchange, charged with the representation of an exchange or effectively acting in such capacity whether formally appointed or not.

<u>A Director</u> - includes an individual occupying the position of a director of the company, by whatever name he may be called, empowered to carry out substantially the same functions in relation to the direction of the company as those carried out by a director.

<u>A Senior Manager means</u> - a person employed or appointed by the exchange who, under the immediate authority of a director or the Chief Executive of the institution, exercises managerial functions or is responsible for maintaining accounts or other records of the institution.

<u>A Chief Executive means</u> - a person who is employed or appointed by the institution and who either alone or jointly with others is or will be responsible under the immediate authority of the directors for the conduct of the business of the exchange.

<u>Associate</u> - in relation to a person entitled to exercise or control the exercise of voting power in relation to, or holding shares in, a body corporate, means -

- (a) the wife or husband or son (including step-son) or daughter (including step-daughter) of that person;
- (b) any company of which that person is a director;
- (c) any person who is an employee or partner of that person;
- (d) if that person is a company -
 - (i) any director of that company
 - (ii) any subsidiary of that company;
 - (iii) any director or employee of any such subsidiary; and
- (e) if that person has with any other person an agreement or arrangement with respect to the acquisition, holding or disposal of shares or other interests in that body corporate or under which they undertake to act together in exercising their voting powers in relation to it, that other person.

APPENDIX ONE

STANDARD LETTER

FIT AND PROPER ENQUIRY - BANKER'S AUTHORITY

The Manager	
()
()
()
()

Date (

Personal & Confidential

Dear ()

Re: (Name, Address, ID No. - if known)

)

This letter is to authorise you to respond to the questions set out below and about which the Malta Financial Services Authority ("MFSA") will be writing to you under separate cover. The MFSA is responsible - inter alia - for the regulation and supervision of financial services activities carried out in or from Malta.

I am in the process of being appointed by an officer of a Recognised Investment Exchange, to occupy the role of ______. The MFSA is making the enquiries set out below as part of their standard "fit and proper" checks.

In the near future, the MFSA will write to you to ask you to confirm that I maintain with your Bank, the account(s) described below. They will also want to know whether:

- 1. the account (No.) is a personal account in my sole name;
- 2. the account has been maintained for some time and if so for how long;
- 3. there are any other accounts to which I am a party whether sole, joint, personal, corporate or any other, either presently or previously;
- 4. all the accounts referred to (in 1 and 3) have been maintained satisfactorily;
- 5. the Bank has ever required me to close an account to which I was a party.

The MFSA will also request any additional explanatory information that you can provide if you are unable to confirm any or all of these statements and for any additional information that you consider may be relevant to MFSA's purposes as described above.

Information that you disclose will not be divulged to me or to any other party without your prior approval.

I should be grateful if you would respond to the MFSA direct at your earliest convenience. If there is a charge for this service, it should be debited to the account described in No. 1 above.

Yours sincerely

Mr..... bank/guides/fitbnkau

THE ENVELOPE SHOULD BE MARKED "PERSONAL & CONFIDENTIAL"

c.c. Director - Investment Services Investment Services Unit Malta Financial Services Authority