

**[Date]**

**[Recipient Name/Financial Institution]**

[Recipient Address]

[City, State, Zip Code]

**RE: Certification of Beneficial Ownership Information for [Legal Entity Name]**

To Whom It May Concern,

I, **[Name of Person Opening Account/Authorized Signer]**, in my capacity as **[Title/Position]** of **[Legal Entity Name]** (the "Entity"), hereby certify that the information provided below is complete and accurate to the best of my knowledge.

The following individuals directly or indirectly own 25% or more of the equity interests of the Entity:

**Beneficial Owner 1:**

Full Name: [Name]

Date of Birth: [DOB]

Address: [Residential Address]

ID Number (SSN/Passport): [Number]

**Beneficial Owner 2 (if applicable):**

Full Name: [Name]

Date of Birth: [DOB]

Address: [Residential Address]

ID Number (SSN/Passport): [Number]

The following individual holds significant responsibility to control, manage, or direct the Entity (e.g., CEO, CFO, Managing Member):

**Control Person:**

Full Name: [Name]

Title: [Title]

Date of Birth: [DOB]

Address: [Residential Address]

ID Number (SSN/Passport): [Number]

I agree to notify **[Recipient Name/Financial Institution]** of any change in the beneficial ownership information provided above.

Sincerely,

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**[Signature]**

[Print Name]

[Title]

[Legal Entity Name]