INSTRUCTION OF CUSTOMER INFORMATION UPDATE

It will take you about 10 minutes to update the form. There is no need to sign and scan the form. Data provided in the form will be confirmed using the means of logging in to the Internet bank. We will receive the form automatically, so there is no need for you to additionally arrive to a bank division.

Follow the steps below

01-02-03-04-05-06-07-08

= Citadele	n Acc	ounts and payments	Payment cards	Loans and leasing	Savings and inves	tments E. Services
Messages	Messages					
Free form application						
Send Document	Topics 1 - 2 (Total	2)				
Questionnaire						
Proccessing of personal data ^						
Submit the request						
Consent for direct marketing						

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Citadele Accounts and payments Accounts and payments Accounts and payments Accounts and payments Messages Free form application Send Document Cuestionnaire QuestionNAIRE Residents Submit the request Consent for direct Consent for direct Cuestionnaire for Natural person. Questionnaire for Natural person. Download Non-Residents Questionnaire for Natural person. Download Non-Residents Questionnaire for Natural person. Download Non-Residents Questionnaire for Natural person. Questionnaire for Natural person. Download Non-Residents Questionnaire for Natural person. Questionnaire for Legal entity. Download HDPRTANT. It is required to complete all fields/questions in the questionnaire. Incomplete questionnaires shall be		Messages 🔅 Settings ? Help 🕒 Name Surname Logout 🗙
Free form application Send Document Questionnaire QUESTIONNAIRE Proccessing of personal data Click on "Download" and download the required form for natural or legal persons Residents Submit the request Consent for direct marketing Questionnaire for Legal entity. Download Non-Residents - Questionnaire for Natural person. Download Non-Residents - Questionnaire for Natural person. Download Non-Residents - Questionnaire for Natural person. Download Non-Residents - Questionnaire for Legal entity. Download Non-Residents - Questionnaire for Legal entity. Download Non-Residents - Questionnaire for Legal entity. Download ImportANT. It is required to complete all fields/questions in the questionnaire. Incomplete questionnaires shall be	= Citadele	Accounts and payments Payment cards Loans and leasing Savings and investments E. Services
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Non-Residents Questionnaire for Natural person. Download Questionnaire for Legal entity. Download IMPORTANT. It is required to complete all fields/questions in the questionnaire. Incomplete questionnaires shall be		- Questionnaire for Legal entity. 🗅 <u>Download</u>
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IMPORTANT. It is required to complete all fields/questions in the questionnaire. Incomplete questionnaires shall be		- Questionnaire for Natural person. 🗅 <u>Download</u>
		- Questionnaire for Legal entity. 🗅 <u>Download</u>
returned for completion.		

01 - 02 - 03 - 04 - 05 - 06 - 07 - 08

CUSTOMER'S QUESTIONNAIRE (F)

Citadele

Dear Customer, pursuant to laws and other legislation governing money laundering and terrorism financing prevention, and tax administration, AB "Citadele" bankas is required to gather information about its customers and their operations. For the above reason, we are asking you to fill in this questionnaire. We will ensure confidentiality of your data. Please fill in the questionnaire in block letters using a black or blue pen; where the answer has to be marked, use symbol X. If you need more space to provide your answer, please provide it in the additional page(s) and submit them to the bank employee together with this questionnaire. Thank you for

cooperation.

1. DETAILS OF THE	E CUSTOMER			
Name, surname			National identification number (or date of birth, if the person does not have national identification number)	
Citizenship(s)			Place of birth (country)	
Residential address postal code, city, cou	(street, house, apartment untry)	No.,		
Correspondence address)	dress (if different from the			
Phone number		E-mail		
Are you a permanen Lithuania?	t resident of the Republic	of 🛛 YES 🗆 NO	Do you have a residence permit in Lithuania? (for foreigners only)	🗆 YES 🗆 NO
	nent resident of the Repul	olic of		

Save the downloaded form to your computer

$$01 - 02 - 03 - 04 - 05 - 06 - 07$$

CUSTOMER'S QUESTIONNAIRE (F)

Citadele

Dear Customer, pursuant to laws and other legislation governing money laundering and terrorism financing prevention, and tax administration, AB "Citadele" bankas is required to gather information about its customers and their operations. For the above reason, we are asking you to fill in this questionnaire. We will ensure confidentiality of your data. Please fill in the questionnaire in block letters using a black or blue pen; where the answer has to be marked, use symbol X. If you need more space to provide your answer, please provide it in the additional page(s) and submit them to the bank employee together with this questionnaire. Thank you for

cooperation.

1. DETAILS OF THE CUSTOMER			
Name, surname		National identification number (or date of birth, if the person does not have national identification number)	
Citizenship(s)		Place of birth (country)	
Residential address (street, house, apartm postal code, city, country)	ent No.,		
Correspondence address (if different from residential address)	the		
Phone number	E-mail		
Are you a permanent resident of the Repul Lithuania?	blic of 🛛 🗆 YES 🗆 NO	Do you have a residence permit in Lithuania? (for foreigners only)	🗆 YES 🗆 NO
If you are not permanent resident of the Re			

-08

Fill in all the fields of the form, provide answers to all the questions and tick off the appropriate answers

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Messages		Questionnaire	
Free form application			
Send Document		Terms and Conditions	
Questionnaire		QUESTIONNAIRE	
Proccessing of personal data	۸	Residents	
Submit the request		- Questionnaire for Natural person. 🗅 <u>Download</u>	
Consent for direct marketing		- Questionnaire for Legal entity. 🗅 <u>Download</u>	
		Non-Residents	
		- Questionnaire for Natural person. 🗅 <u>Download</u>	
		- Questionnaire for Legal entity. 🗅 <u>Download</u>	
_		IMPORTANT. It is required to complete all field returned for completion.	s/questions in the questionn Attach the complete is no need to sign a
		Name Surname/Title:	function and click
		Please upload questionnaire	
		Questionnaire:	Choose File No file chosen
			Create and Sign



01-02-03-04-05-06-07-08

Messages	Questionnaire			
Free form application				
Send Document Questionnaire	Operation created. Now it should be signed.			
Proccessing of personal data ^ Submit the request	Please upload questionnaire Questi	ionnaire:	EN (3).docx	Sig logg cc
Consent for direct marketing	Logon with Code Card	07		
		07:		
			Sign Postp	one sign



01-02-03-04-05-06-07-08

	vith operati		d after being confirr	med
Operation has t	·		d after being confirr	med
	peen signed. It will be	e executed	d after being confirr	med



01 - 02 - 03 - 04 - 05 - 06 - 07 - 08

We will check the form. In the event of any errors, you will be sent a notification via the Internet bank. In such event, you will have to fill in the form again and attach the correct form.

If you have any questions, please call 19091 or +370 5 221 9091 (calls from abroad).

Thank you for your time!