Quarterly Returns Declaration Form

(to be completed by a Director)

To: Financial Services Authority	
I,, the Director for	
declare that to the best of my knowledge and belief, the information provided for the Quarterly Returns	
for the reporting period is true and correct.	
I undertake to promptly advise and disclose to the Financial Services Authority	of any material changes to
the submitted information or new information that arises which may affect the affairs of the company.	
I understand that pursuant to Section 27(1)(a)(x) of the Financial Services Authority Act, the Authority may	
take enforcement action against a licensee if the licensee has provided the Authority with false, inaccurate	
or misleading information.	
Dated:	
	Company Seal
Signature:	company ccu.
Name:	