

**WESTLINK GLOBAL EQUITIES, INC.***Your partner in the new economic order.*6/F Unit 614-616 PSE Plaza Tower I
Ayala Ave., Makati City, Philippines 1226
Tel.: 848-6231 • Fax: 848-6229**CLIENT ACCOUNT INFORMATION AND AGREEMENT FORM
(For Individual Accounts)****MEMBER: Philippine Stock Exchange, Inc.
Securities Investor Protection Fund, Inc.****Client Account Code**

SEC Registration No. 148260

Broker Dealer

RISK DISCLOSURE STATEMENT

The price of securities can and does fluctuate and any individual security may experience upward or downward movements, and may even become valueless. There is an inherent risk that losses may be incurred rather than profit made as a result of buying and selling securities.

UNDERTAKING

Westlink Global Equities, Inc. undertakes to notify the client in writing of new or modified compliance obligations or in the event of any material change to the information provided in this agreement.

Last Name, First Name, Middle Name, Nationality**CLIENT NAME:****ACCOUNT TYPE**

___ Cash

___ Discretionary

___ Institutional

___ Margin

___ Bonds trading

 TIN : _____ SSS / GSIS NO. : _____
 Name of Spouse : _____
 Home Address : _____ Home Telephone : _____
 Business Address : _____ Home FAX Number : _____
 Occupation : _____ Business Telephone : _____
 Date of Birth : _____ Business Fax Number : _____
 Photocopy of ID provided: ___ Driver's licence ___ SSS/GSIS ___ Passport ___ Employer ID ___ Others

 Name of Employer : _____
 Is your employer a registered broker dealer? ___ Yes ___ No
 Are you an officer/director of a listed company? ___ Yes ___ No
 If so, please identify the company : _____
 Name of attorney-in-fact, if any : _____

 Customer referred by : _____
 Length of time known by agent : _____
 Bank Account Reference:
 Bank/Branch _____ Acct. Type _____
 Do you have accounts with other broker dealers? : ___ Yes ___ No
 If so, please indicate name/s of broker/s : _____
Investment Objective: ___ Speculation ___ Preservation of Capital ___ Growth ___ Long term investment**Years of experience in equities investment**

___ Less than 1 year ___ Less than 5 years ___ More than 5 years ___ More than 10 years

Financial Information

Less than P5MM

(Please tick applicable box)

Less than P10MM

More than 10MM

Source of Funds

-
- Employed
-
-
- Self-Employed
-
-
- Businessman

 Annual income _____
 Assets _____
 Net Worth _____

Should you refuse to disclose the financial information required, please indicate reason/s, if any.

Reason for non-disclosure:

Please provide photocopies of proof.

Are duplicate confirmations required? ___ Yes ___ No

Person to send to : _____

Relationship to customer : _____

Settlement/Delivery instructions:
 Documentation of certificate ___ Client's name ___ WGEI's name
 Address for delivery of certificate, ___ Facsimile ___ Email
 confirmation notices, etc. ___ Office ___ Residence
FOR DISCRETIONARY ACCOUNTS

Signature of person authorized to exercise discretion

Date discretion is granted

Authorized person to give orders

Relationship to customer

Schedule of other fees and charges:
 Minimum service charges:
 Minimum service charge on day-trade transactions. (Buy and sell of the same security on the same day)
 P _____ + 10% VAT / 7% GRT
 Minimum service charges on regular transactions
 P _____ + 10% VAT / 7% GRT
 Exchange or transfer of securities:
 PCD Upliftment/transfer fee P _____ / certificate
 Cancellation fee P _____ / certificate
 Interest charges on accounts not paid on settlement date:
 Prevailing bank rate + _____ % p.a. : Interest = Unpaid balance x prevailing bank rate + _____ % x number of days overdue divided by 360 days
 Other Charges:
 Transaction tax (BIR) : _____ % of transaction value
 PCD/SCCP Ad valorem fees : _____ % of transaction value
 Documentary stamps tax (BIR) : Number of shares x par value x P1.50 divided by P200
 Documentary stamps tax (BIR) : Sunlife: No. of shares x P .87 Manulife: No. of shares x P1.24 Warrants: Nil
 VAT/GRT on commission (BIR) : 10% / 7% of commission

Authorized representative to accept documents in our behalf

Name : _____

Specimen signature of representative : _____

I hereby certify that I have read and understood the contents of this agreement and the risk disclosure statement as stated above. I have participated in an interview or meeting conducted by an associated person/salesman/agent designated by WGEI at which meeting/interview compliance matters relevant to my investment activities as a customer was discussed. I undertake to promptly notify WGEI in writing in the event of any material change to the information provided in this agreement.

Authorized Signatory

FOR WESTLINK GLOBAL EQUITIES, INC. USE ONLY

I hereby undertake to ensure that I will comply with my obligations under Rule 30.2-1 of the implementing rules and regulations of the Securities Regulation Code and this client account information and agreement form. This client agreement shall not operate to remove, exclude or restrict any rights of the client or obligations of WGEI.

Signature of Salesman/Agent/Associated Person

Commission Rate _____ Approved by:

Account Executive _____

Date Opened _____

(Please read and acknowledge the attached terms and conditions)