

I. CLIENT INFORMATION

1. Full name*	
2. Date of Birth*	
3. Passport/ID Card N° *	
4. Date of Issue*	
5. Citizenship:*	
6. Permanent Address:*	
7. Postal Address:	
8. Country code; area code; telephone number*	
9. Fax number:	
10. Marital status:	

II. INFORMATION DISTRIBUTION METHODS*

I choose to receive the information, which Deltastock AD is obliged to provide to its clients via:

Post:

The address used for the receipt of the information shall be:

E-mail:

Fax:

III. APPROPRIATENESS ASSESSMENT OF THE SERVICES PROVIDED TO THE CLIENT

Declare that I refuse to provide in part or in full the requested by Deltastock AD information regarding my education, occupation, financial status or trading knowledge and experience. I am informed that my refusal will lead to the inability of Deltastock AD to fulfill its obligation to assess the appropriateness of the offered services.

I am informed that Deltastock AD will from time to time request an update of the information provided in this Appendix that shall be sent to the address or fax number stated under Section II. above.

I refuse to update the information requested by Deltastock regarding my education, occupation, financial status or trading knowledge and experience.

Declarant: _____
(signature)

1. EDUCATION

1. Do you have a numerate university degree?(For example: economics, mathematics, physics, accounting)

If yes please, provide details: _____

Yes No

2. Do you have a relevant professional qualification that you consider would assist your understanding of leverage products in general?

If yes, please provide details: _____

Yes No

3. Occupation:

4. Name of Employer:

5. Nature of Business:

2. INVESTMENT TARGETS

What are your investment targets:

- Speculation

- Hedging

3. FINANCIAL DETAILS

1. Annual Income (USD) :	
2. Risk capital (USD):	

4. TRADING KNOWLEDGE AND EXPERIENCE

Stock Trading:	<input type="checkbox"/> No experience <input type="checkbox"/> Less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years
Group Investment Schemes	<input type="checkbox"/> No experience <input type="checkbox"/> Less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years
CFDs on Shares and Indices	<input type="checkbox"/> No experience <input type="checkbox"/> Less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years
Stop and Forward trades with Foreign Currency, Currency options:	<input type="checkbox"/> No experience <input type="checkbox"/> Less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years
Other derivative instruments:	<input type="checkbox"/> No experience <input type="checkbox"/> Less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years
Other:	<input type="checkbox"/> No experience <input type="checkbox"/> Less than 1 year <input type="checkbox"/> from 1 to 3 years <input type="checkbox"/> over 3 years
Approximate number of transactions per month:	
Average amount of money involved in one transaction:	

IV. HOW DID YOU FIND OUT ABOUT US?*

1. A friend told me:	<input type="checkbox"/>
2. From a Search engine	<input type="checkbox"/>
3. From a website (please specify)	_____
4. Referred by Deltastock IB	_____
5. Other (please specify)	_____

V. APPLICATION DOCUMENTS

1. Copy of Passport/ID Card*	2. Proof of Residential Address*
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* **Mandatory fields**

To be completed by an employee of Deltastock AD:	
<i>I have been informed that based on the assessment of Deltastock AD the services I apply for:</i>	
<input type="checkbox"/> <i>is appropriate for me</i>	<input type="checkbox"/> <i>is not appropriate for me</i>
<input type="checkbox"/> <i>lacks sufficient information</i>	<input type="checkbox"/> <i>cannot be assessed</i>

By completing and signing this appendix I agree with the following:

- I hereby accept and agree to be classified by Deltastock AD as a "non-professional client".
- I am informed that I have the right to request a change in my classification to a "professional client" status, as well as that any such change will result in a lower level of regulatory protection.
- I am informed and agree with all of Deltastock's policies and procedures regarding the classification of professional clients.
- I do wish / I do not wish to be classified as a "non-professional client".
- I DECLARE THE ABOVE INFORMATION IS COMPLETE AND ACCURATE AND I WILL PROMPTLY NOTIFY DELTASTOCK AD IN WRITING IF ANY OF THE REPRESENTATIONS CONTAINED HEREIN SHALL MATERIALLY CHANGE OR CEASE TO BE TRUE AND CORRECT.

Date: _____

Signature: _____

dd/mm/yyyy