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## HOMELAND SECURITY - PATRIOT ACT STATEMENT OF COMPLIANCE

In order to complete our compliance obligation with the USA Patriot Act, we are required under our policy and program to acquire the following identifying information for all our business partners and customers. Please provide the following identifying information.

Legal Name:	<input type="text"/>
Company Name (dba) if different::	<input type="text"/>
Business Address:	<input type="text"/>
City:	<input type="text"/> State: <input type="text"/> Zip Code: <input type="text"/>
Phone number:	<input type="text"/> Fax number: <input type="text"/>
Email Address:	<input type="text"/>
Website Address:	<input type="text"/>
Tax ID/EIN or Social Security Number:	<input type="text"/>
Resale Certificate Number:	<input type="text"/>
Name of Owners:	<input type="text"/>
Name of Gemstone Buyer(s) (if different):	<input type="text"/>
Have you or will you establish an AML Program, in accordance to the USA Patriot Act?	
<input type="radio"/> Yes --- <input type="radio"/> No	
Your response to this inquiry is an important element in our compliance program. Your prompt attention to this matter is greatly appreciated. All information will be kept confidential.	

Contact [Betty Sue](#) - the Pearl Goddess!  
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