

# CONFIRMATION OF VERIFICATION OF IDENTITY

## PRIVATE INDIVIDUAL

### INTRODUCTION BY AN FSA-REGULATED FIRM

#### 1 DETAILS OF INDIVIDUAL (see explanatory notes below)

Full name of Customer	GILLIAN TELFORD
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Current Address	18 THE ORCHARDS LEYLAND PRESTON PR26 7SZ.	Previous address if individual has changed address in the last three months
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Date of Birth	30-08-1974.
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#### 2 CONFIRMATION

I/we confirm that

- (a) the information in section 1 above was obtained by me/us in relation to the customer;
- (b) the evidence I/we have obtained to verify the identity of the customer:

*[tick only one]*

meets the standard evidence set out within the guidance for the UK Financial Sector issued by JMLSG : or	<input checked="" type="checkbox"/>
exceeds the standard evidence (written details of the further verification evidence taken are attached to this confirmation).	<input type="checkbox"/>

Signed	AM Atkins
Name:	ANN-MARIE ATKINS
Position:	CHARTERED FINANCIAL PLANNER
Date:	26-02-2013

#### 3 DETAILS OF INTRODUCING FIRM (OR SOLE TRADER)

Full Name of Regulated Firm (or Sole Trader):	BESTINVEST WEALTH MANAGEMENT (NATIONAL).
FSA Reference Number:	134190.