

UPDATE YOUR PRODUCT CATEGORY KNOWLEDGE (PCK)

Date: / / -------

The following questions will help us assess your knowledge and experience in a particular product category. This will help us assess if you have sufficient understanding of the general features and risk associated with a particular product category and make investment recommendations that are suitable for you.
 Product Category Knowledge may be assessed based upon your relevant past investment experience, professional education and/or professional knowledge.
 Your PCK will not change/expire until you change it through this Questionnaire.

Account Number: Name:

Please indicate which of the following products you have knowledge of/have experienced before:	I have knowledge in this product based on past investment experience/education/Education by Citi Relationship Manager /professional knowledge/other sources			
Tier 1	Yes	No		
Managed Products				
Mutual Funds				
Closed ended funds and Exchange Traded Funds (ETFs)				
Alternative Mutual Funds in form of Alternate Investment Funds				
Managed Portfolios / Portfolio Management Services (PMS)				
Capital Market Products				
Fixed Income				
Hybrid Securities				
Insurance Products				
Investment Linked Insurance				
Please indicate which of the following products you have knowledge of/have experienced before:	I have Knowledge in this product based on past investment experience/ education/relationship manager/professional knowledge/other sources		If Yes, please indicate: A) Source of Knowledge PE for Past Investment Experience ED for Professional Education RM for Education by your Citi Relationship Manager PK for Professional Knowledge OT for Other Sources B) Number of Transactions previously executed	
Tier 2	Yes	No	A*	B
Managed Products				
Hedge Funds				
Private Equity				
Private Real Estate				
Capital Market Products				
Structured Products				

*If you have indicated RM as a source of knowledge, please tick the box below to confirm that you were previously provided the Citi education materials by e-mail or print and that you are still sufficiently comfortable with your level of knowledge to conduct transactions for those products.

The form should be signed after all the details are completely filled.

Signature (with Stamp)

- 1. _____
- 2. _____
- 3. _____
- 4. _____

BANK USE ONLY

Section 1 - RM Checks.

Customer Number(CIF):

Verified by

RM Signature and Name

Date/Time

Section 2A - Service Checks - If SRM is Maker

- RM to have signed in Section 1.
- Customer Signature(s) verified.
- If the client has indicated that the RM has provided PCK in the PCK table, the box below the table confirming the same has been ticked by the client.

Verified by

Signature and Name

Date/Time

Section 2B - Service Checks - If RM is Maker

- I have signed in Section 1
- Customer Signature(s) verified by SRM
- If the client has indicated that RM has provided PCK in the PCK table, the box below the table confirming the same has been ticked by the client.

Verified by

Signature and Name

Date/Time

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