



SOURCE OF WEALTH INFORMATION FORM

We have a requirement to gain additional information on your account in order to fulfil the regulatory requirements that allow us to offer you our gaming services. We apologise in advance for the inconvenience and we would be grateful if you could provide some further information. All information will be held in the strictest confidence and secured in accordance with the stringent Data Protection laws that we adhere to.

Please note that this request is part of a normal process required by our regulators to assist in the identification and prevention of money laundering and financial crime; and to ensure that we take appropriate measures to understand and assess our customers' use of funds where relevant.

Failure to provide information within the specified timescale may result in your account being restricted or closed.

Username:	
Full name:	
Date of birth (DD/MM/YYYY):	
Place of birth:	
Nationality (where multiple nationalities please include all):	
Email address:	
Profession:	
Self-employed/employed full time/employed part time (delete as apt)	
Employer name:	
Employer address:	
Annual salary/income (include currency):	
Employment start date:	

Please indicate how you have generated your wealth allowing you to fund your Stars Account: (Please provide all relevant details ticking more than one where appropriate)

Employment:

Employment details as above? (Yes/No)	
Previous employment: Provide details	

Sale of business:

Dividend amounts realised from employment: (include currency)	
Sale of own business- amount realised: (include currency)	

Investment:

Investment type:	
Amount realised: (include currency)	

Sale of property:

Address of property:	
Property sale proceeds received: (include currency)	



SOURCE OF WEALTH INFORMATION FORM (CONT.)

Inheritance:

Name of donor:	
Relationship to donor:	
Amount received: (include currency)	

Gambling winnings:

Name of gambling operator:	
Amount of winnings: (include currency)	

Other: Where your wealth has originated from something other than the above please provide details in the below including values and appropriate detail:

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Please indicate how much you anticipate spending via your Stars Account:

Monthly amount	
Annual amount	

Do you anticipate receiving funds from third parties into your Stars Account *(If yes please provide details)*

Yes or No	
Details of who you expect to receive funds from and for what purpose. Where possible please specify amounts you expect to receive.	

Signed (digital signature acceptable) _____

Date completed: _____

We hope that this will be all the information that we need, however, we may require that you provide additional information and documentation, to support the entries on this form. Depending upon your future activity, we may need to ask you to re-submit this form to ensure our data remains current and complete. All information collected in this form will be held, accessed and secured in accordance with relevant Data Protection Laws. You will find our player Privacy Policy on our website.