

PERIODIC REVIEW RESPONSE FORM

ACCOUNT NAME:	
PORTFOLIO NO:	

CLIENT'S SURNAME:	
CLIENT'S FIRST NAME(S):	
CLIENT'S PRIOR / MAIDEN NAME(S):	
CLIENT'S DATE OF BIRTH:	DD/MM/YYYY

Please note that should you have a change of name, change of residential address, change of contact details or you wish to amend the bank account associated to your account, please ensure that you inform Ashburton at your earliest convenience*.

ANY CHANGES TO MAKE ASHBURTON AWARE OF* : (e.g. Change of name, residential address, contact details, or any parties associated with the account, such as a new vested beneficiary, shareholder, signatory etc).
SOURCE OF FUNDS* : (Please describe the activities that generated the funds that you used to finance the above Account e.g. salary, inheritance, sale of property and provide details. Please also include details of which country / countries the funds originated from)
SOURCE OF WEALTH* : (Please described the activities which have generated your total net worth e.g. employment, business activities, property etc. Please also include details of the country / countries within which the net worth was originated).
FUTURE ACCOUNT EXPECTATIONS: (Please reaffirm any planned activity for the above account, to include expected amounts and frequency).

*On occasion we may need to ask for supplementary evidence / details

CLIENT'S SIGNATURE:	SIGN HERE
FORM COMPLETED ON:	DD/MM/YYYY

ONCE THE ABOVE IS COMPLETED PLEASE PROCEED TO TAKE A PHOTO / SCAN THE DOCUMENT AND EMAIL IT TO: AMLREVIEWS@ASHBURTON.COM, ALONG WITH COPIES OF ANY ADDITIONAL DOCUMENTS REQUESTED IN YOUR COVERING LETTER.

Section 3 – Documents you have been asked to provide were:

YES/ NO	Updated Photographic ID
YES/ NO	Updated Address Verification
YES/ NO	Copy of Bank Statement