

ANNEX A

THIRD PARTY REGISTRATION FORM

This form must be filled in and submitted to the Chief Compliance Officer (compliance@hesinternational.eu). A copy must be sent to your local compliance officer.

Name employee:		Signature:
Job title:		
Date:		

Third Party Registration Form	
Details of Third Party	
Statutory name:	
Statutory seat:	
Registration number:	
Description of prospective engagement:	
Any information regarding the Third Party that is of relevance during the Engagement Procedure:	
Has the DDQ been completed and signed and returned to you?	YES <input type="checkbox"/> If so, please attach a copy to this form. NO <input type="checkbox"/> If not, please describe why not.

Sanctions Screening	
Result of the Sanctions Screening:	
Any information regarding the Sanctions Screening that is of relevance:	