

PERSONAL ACCOUNT SIGNATURE CARD

Account Type 101 Account Description INDIVIDUAL CHECKING

ACCOUNT NUMBER

A. Account Title(Print or Type Last Name First) <u>Jeffrey E. Epstein</u>			B. Name of Joint Party		
Signature <u>[Signature]</u>	Date <u>11/8/00</u>	Signature		Date	
Birth Date	Birthplace	Citizen/Subject of	Birth Date	Birthplace	Citizen/Subject of
[Redacted]	[Redacted]	<u>USA</u>			

Indicate Mailing Address with an "X" in Box Below Home Address of A or B

Home Address (include Zip Code) Home Phone

6100 RED HOOK QUARTER B3

St. Thomas, Virgin Islands 00802

Name and Address of Business (include Zip Code) Business Phone

FINANCIAL TRUST COMPANY, INC

6100 Red Hook Quarter

St. Thomas, VI 00802

A. Mother's Maiden Name [Redacted] B. Mother's Maiden [Redacted]

A. Account Holder Social Security Number for 1099 Tax Reporting [Redacted]

B. Joint Account Holder Social Security Number (No 1099 Reporting)

Beneficiary, if any. (Not for Checking Accounts.)

Name and Home Address of Beneficiary	Birth Date	Birthplace
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Chase reserves the right to check and verify references at account opening. Periodically we send valuable information to our customers about new products and services offered by or through Chase. If you do not wish to receive this information by mail or telephone, please check this box . I/we acknowledge receipt of a copy of Terms and Conditions Agreement, Regulations, and Fee Schedule applicable to this/these account(s) and agree to be bound by these Terms and Regulations.

AUTOMATIC TRANSFER

Yes No Please arrange to transfer from my Statement Savings Account Number _____ the amount necessary to cover any overdraft in my checking account.

Name and Address of Bank Reference and Account No.

ANDREA CHOX SJS. 67 NY NR.

Customer ID	Sig. Ver. by	Initial Deposit	Interviewer	Mgt. Review
<u>RET. COLE DE JONGH.</u>				

I/we acknowledge receipt of the Account conditions and Rules and Regulations applicable to the account and agree to be bound by them.

W9 Under penalty of perjury, I certify that: (1) The number on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), or (2) I am not subject to back-up withholding because: (a) I am (we are) exempt from back-up withholding, or (b) I (we) have not been notified by the Internal Revenue Service that I am (we are) subject to back-up withholding as result of failure to report all interest or dividends, or (c) the IRS has notified me (us) that I am (we are) no longer subject to back-up withholding. (If you are subject to back-up withholding, cross out the words that state you are not. See separate instruction sheet for details.) Account holder Social Security Number for 1099 Tax Reporting.

W8 By checking this box the account owner represents and warrants that he/she is not a US person for purposes of US federal income tax and that he/she is not acting for or on behalf of a US person. A false statement or misrepresentation of tax status by a US person could lead to penalties under US law. If your tax status changes and you become a US citizen or resident, you must notify us within 30 days. (Provide the appropriate W8 form to the customer for completion.)

If the account holder fails to check either the W9 or W8 statement and does not provide the Form W-9 or Form W-8 you must rely on the presumption rules set forth in the account agreement.

A. Signature Customer(s) [Signature] Date _____

B. Signature _____ Date _____

CONFIDENTIAL

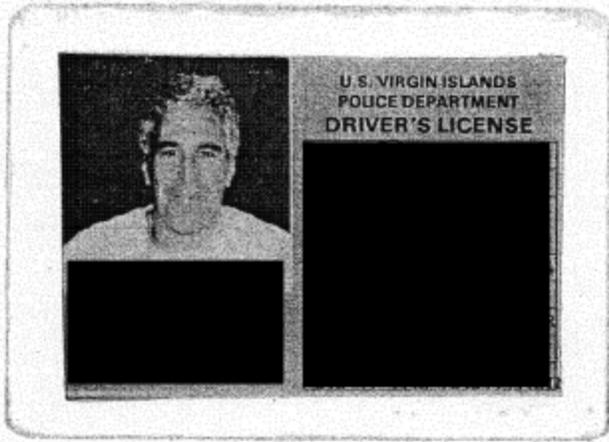
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CONFIDENTIAL

FirstBankPR000460

EFTA_00123940

EFTA01269144



CONFIDENTIAL

SDNY_GM_00013298

CONFIDENTIAL

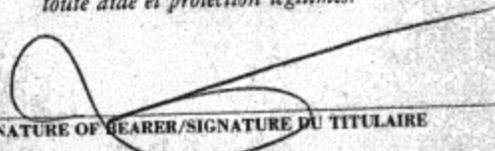
FirstBankPR000461

EFTA_00123941

EFTA01269145

The Secretary of State
of the United States of America
hereby requests all whom it may concern to permit the citizen/
national of the United States named herein to pass
without delay or hindrance and in case of need to
give all lawful aid and protection.

Le Secrétaire d'Etat
des Etats-Unis d'Amérique
prie par les présentes toutes autorités compétentes de laisser passer
le citoyen ou ressortissant des Etats-Unis titulaire du présent passeport,
sans délai ni difficulté et, en cas de besoin, de lui accorder
toute aide et protection légitimes.



SIGNATURE OF BEARER/SIGNATURE DU TITULAIRE

NOT VALID UNTIL SIGNED

UNITED STATES OF AMERICA

PASSPORT
PASSEPORT

Type/ Catégorie: P
Code of issuing / code du pays: USA
State / Etat: USA
PASSPORT NO. / NO. DU PASSEPORT: 110708878

Surname / Nom: EPSTEIN
Given names / Prénoms: JEFFREY EDWARD
Nationality / Nationalité:



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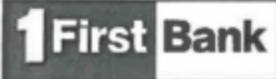
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FirstBankPR000462

EFTA_00123942

EFTA01269146



Virgin Islands

CLOSED

**Security Procedure Agreement
for Telephone/Fax Issuance of
Payment Orders or Request for
International Drafts**

Dear Valued customer:

Date: 10-02-19

By reading, signing and returning this document to us, or by issuing payment orders or requests for international drafts to us subsequent to your receipt, you agree to the terms of this letter.

ISSUANCE OF INSTRUCTIONS

If you issue a payment order to us, or request the issuance of an international draft, by telephone or telecopier (fax), then the condition of our Transfer Application, a copy of which is attached to this letter, will apply. If you issue instructions by fax, we ask that you transmit to us the face of the Transfer Application, properly completed and signed. A supply of Transfer Applications may be obtained from any branch office. If you issue instructions by telephone, you authorize us to complete the Transfer Application in accordance with the instructions received by us.

REPETITIVE PAYMENT ORDERS

You may make arrangements with us, if you desire, for the processing of repetitive orders, i.e. payment orders in which your account to be debited, the name and ABA routing number of the beneficiary's bank (and intermediary bank, if applicable) and the name and account number of the beneficiary are preestablished, and in which only the dollar amount and the date of execution are variable. This pre-established information must be supplied to us in writing.

SECURITY PROCEDURE

As a general matter, we shall verify the authenticity of payment orders or requests for international drafts issued in your name as part of your Bank relationship, which exceed dollar thresholds from time to time established by us, by call-back to you (or a designated signer on your account) at the telephone number in our records or as provided below. We shall be authorized to accept confirmation, which we believe to be genuine. Telephone number changes for call-backs must be provided to us in writing. We may, but we shall not be obligated to, record telephone calls or call-backs.

MISCELLANEOUS

We may from time to time provide you with opening procedures or instructions for use of our services. The terms under which we provide such services; including any operating procedures, are subject to amendment upon five days' prior notice to you. All services are rendered subject to the terms and conditions governing your account(s). This letter of agreement shall be governed by the laws of the territory of the U.S. Virgin Islands.

FirstBank

AUTHORIZED BY: (PRINT NAME) Richard Young	BRANCH Waterfront	DATE 2/5/2016
SIGNATURE 	TITLE Platinum Manager	ECA NUMBER [REDACTED]

TELEPHONE NUMBER FOR CALL-BACKS AND PERSON(S) DESIGNATED TO AFFIRM OR DISAFFIRM PAYMENT ORDERS OR COMMUNICATIONS	
NAME(S)	TELEPHONE NO.(S)
1. Jeffrey Epstein	[REDACTED]
2. Bella Klein	[REDACTED]
3.	

CUSTOMER ACKNOWLEDGEMENT	
DATE: 2/5/2016	
MARK ONE BOX	<input checked="" type="checkbox"/> NEW AGREEMENT <input type="checkbox"/> REVISED AGREEMENT
ACCOUNT TITLE (PRINT) Jeffrey Epstein	PRIMARY ACCOUNT NUMBER [REDACTED]
BY: (AUTHORIZED SIGNATURE ON ACCOUNT DEBITED)	(AUTHORIZED SIGNATURE ON ACCOUNT DEBITED)

FirstBank Virgin Islands is a division of FirstBank Puerto Rico
NNNS-2150-1102

SDNY_GM_00013300

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FirstBankPR000463

EFTA_00123943

EFTA01269147

SQN Signature Display

Account #	[REDACTED]	Date Added	01-30-2001
Account Name	JEFFREY E. EPSTEIN	Date Updated	01-30-2001
SS#/Taxid	[REDACTED]	Open Date	
Branch	[REDACTED]		
App ID	[REDACTED]		
Account Message	[REDACTED]		

Last Name	EPSTEIN	Date Scanned	
First Name	JEFFREY E.		
Mother's Maiden Name			
Signer Message			

Signature



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CLOSED

Date: 10-08-19