

Emergency Contacts Form



Swiss Finance and Investments LTD

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 info@swiss-financeltd.com

Recipient Information:

Full Name:		Date of Birth:	
Nationality		Passport ID /Number	
Address:			
Phone Number:		Email Address:	

Emergency Contact 1:

Full Name:		Relationship to Recipient:	
Phone Number:		Email Address:	

Emergency Contact 2:

Full Name:		Relationship to Recipient:	
Phone Number:		Email Address:	

Declaration: I, the undersigned recipient of the investment from Swiss Finance and Investments LTD, confirm that the information provided above is accurate. I authorize Swiss Finance and Investments LTD to contact the listed emergency contacts in case of an emergency related to my investment.

Signature: