

FORM 1.2

FAMILY INFORMATION DETAILS

Date and Authorized Signatures of M Stamp الختم		Iember	Date:	
			Issuer Number: Member Number	
			Shareholder Number	
			Shareholder Number	
Shareholder Name (in Latin)				
Middle Name				
Last Name				
Name After Marriage				
Husband or Wife Info:				
Name:				
Middle Name:				
Last Name:				
Mother's Name:				
Place and Date of Birt	th:	Nationalit	ty:	
ID or National Number	er:	Date of Is	suance:	
25 01 1 (44202141 2 (44216)		2 400 01 15	,	
Children (Full Na	ame): Specify Female/Male	D	ate of Birth (day/month/year):	