



**ANTI MONEY
LAUNDERING &
COUNTER
TERRORIST
FINANCING

POLICY**

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1 PURPOSE

The purpose of this policy is to establish the procedures required for compliance with current laws on the prevention and detection of money laundering (Act 10/2010, of 28 April, and Royal Decree 304/2014 on the prevention of money laundering and the financing of terrorism in the case of Spain, and all other similar regulation in force in the rest of the countries in which Ferrer has operations).

The purpose of this policy is to also establish a suitable control system to prevent any customers or suppliers from trying to use Ferrer's structure to launder money.

2 DEFINITIONS

2.1 MONEY LAUNDERING

The following are considered to constitute money laundering:

- a) Converting or transferring assets, fully aware that such assets are the proceeds of a criminal offence or being party to a crime, for the purpose of concealing or covering up the unlawful origin of the assets or of assisting any person who is attempting to evade the legal consequences of a criminal offence.
- b) Concealing or covering up the nature, origin, location, disposal or transfer of either the beneficial ownership of assets or in rem rights on assets, fully aware that these assets are the proceeds of a criminal offence or being party to a crime.
- c) Acquiring, possessing or using assets, in the full knowledge, at the time of receipt, that such assets were the proceeds of a criminal offence or being party to a crime.
- d) Taking part in any of the abovementioned activities, being party to them or attempts to commit them, and aiding, abetting or advising someone to carry them out, or facilitating their execution.

Any activities that generate unlawful assets in countries other than Spain shall also be considered as money laundering.

2.2 TERMS

RECOMMENDER

The business unit that handles applications from customers and suppliers to establish a business relationship.

CUSTOMER SERVICE

The Customer Service and Logistics Department.

PURCHASING

The Industrial Purchasing, and the Service and Supplies Purchasing departments.

TREASURY

The Treasury and Financial Projects Department.

ACCOUNTING

The Accounting and Financial Reporting Department.

RACI (recommender, approver, consulted, informed) MATRIX

The responsibility assignment matrix for the various activities involved in the process.

KNOW YOUR CUSTOMER (KYC) QUESTIONNAIRE

The questionnaire to be filled in with information about customers who have submitted an application to establish or re-establish a business relationship with Ferrer, should it be believed that a customer may entail the risk of money laundering.

CFO

The Corporate Financial Officer.

3 SCOPE OF APPLICATION

This policy will apply to:

- Grupo Ferrer Internacional S.A., in addition to any subsidiaries over which it has effective control, hereinafter, Ferrer.
- Governing bodies, senior management and all staff.

The procedures set out in this policy must be adapted to the local laws in force in the case of international self-governing subsidiaries and any such changes approved by Treasury.

4 CUSTOMER APPROVAL



4.1 FILLING IN THE KYC QUESTIONNAIRE

4.1.1 PARTIES AFFECTED

Following an analysis conducted of the risk of money laundering, it has been decided that the KYC questionnaire (see Appendix II) must be filled in under the following circumstances:

- Customers (natural and legal persons) that are non-residents in Spain.
- Customers that are residents in Spain for whom the delivery of products or the provision of services takes place outside of Spain.
- Customers that are residents in Spain that pay for products or services received from another country or company with a different name.

The questionnaire must be submitted by the recommender to Customer Service.

The customer approval form has been modified so that the recommender is able to decide in which cases the KYC questionnaire must be filled in.

4.1.2 CASES IN WHICH THE KYC QUESTIONNAIRE MUST BE FILLED IN

The questionnaire must be filled in whenever:

- A new business relationship with a customer is to be entered into.
- A business relationship is to be re-established with an old customer after more than 3 years without any business being conducted with that customer. In such cases, Customer Service will establish the control mechanisms required to identify when this circumstance has arisen.

Before the questionnaire is filled in, the customer concerned must have been registered on the system (SAP) and, therefore, this shall be a prerequisite for starting any business relationship (the dispatch of merchandise and the provision of services).

The KYC questionnaire must be submitted by the recommender to Customer Service, which will check that the entire questionnaire has been filled in before beginning the customer approval process. Once this check has been conducted, Customer Service will add the questionnaire to the customer's master file on SAP and will inform Treasury of its addition so that it can in turn review it.

4.2 REVIEW OF THE KYC QUESTIONNAIRE, AND REVIEW AND ENQUIRY INTO EXCEPTIONAL CIRCUMSTANCES

Treasury shall be responsible for reviewing the questionnaire and ascertaining whether the information provided by the customer could entail a risk of money laundering (hereinafter, "exceptional circumstances").

Listed below are the situations in which it is understood that the exceptional circumstance described in the above paragraph have arisen.

- Whenever the beneficiary or company name of the recipient of a product or service differs from the company name of the customer invoiced (except in cases in which this circumstance can be contractually proven, in which case the proof must be reviewed by Treasury).
- Whenever a customer's majority shareholders or owners have not been identified.
- Whenever the holder of the bank account from which payments are made differs from the company specified in the section "Company details".

If no exceptional circumstances have been identified, the customer shall be approved.

If such circumstances are identified, Treasury will begin a process to review the case and will contact the recommender, the potential customer and/or external sources to collect further information. At this stage of the process, the customer's approval will be put on hold.

Based on the information obtained, it will weigh up whether a business relationship with the customer in question could entail the risk of money laundering and, therefore, will decide whether or not to approve the customer.

The decision of whether or not to approve a customer must be written up in a report by Treasury and sent to Customer Service and the recommender so that they can put forward new information that enables the customer to comply with the Money Laundering Act.

Should no additional information be obtained, the customer approval process shall be put on hold.

If the recommender disagrees with the decision to put the customer's application on hold, it may request a subsequent review by the CFO, who will decide whether to approve or reject the customer based on the information submitted.

In order to submit a decision to review, the recommender must put forward reasons for the review by filling in the form in Appendix III of this policy.

4.3 SUBSEQUENT MODIFICATIONS TO CUSTOMER DETAILS

Subsequent to a customer having been approved, it may request that modifications be made to its details that involve a change in the money laundering risk assessment conducted at the time of initial approval.

These circumstances are listed below:

- Change in the delivery point of merchandise if outside of Spain.
- Change in the principal that pays invoices.

In these cases, Treasury must be contacted so that it conducts a review in line with the procedure outlined in point 4.2 above.

Furthermore, should there be a change in the customer's shareholder structure that could affect the risk assessment described in point 4.2 above, Treasury must be contacted to look into this circumstance.

5 SUPPLIER APPROVAL



5.1 REQUESTS FOR ADDITIONAL INFORMATION

5.1.1 PARTIES AFFECTED

Following the money laundering risk assessment conducted, it has been decided that the additional documentation listed in 5.1.3 of this policy must be requested from all of the suppliers that work with Ferrer from the time this policy is implemented.

5.1.2 CASES IN WHICH THIS INFORMATION MUST BE OBTAINED

This information must be obtained wherever:

- A new business relationship with a supplier is to be entered into.
- A business relationship is to be re-established with an old supplier after more than 3 years without any business being conducted with that customer. Accounting will establish the control mechanisms required for identifying this circumstance and notifying the recommenders when it arises.

Obtaining all the additional information set out in section 5.1.3 below shall be a prerequisite for registering suppliers on the system (SAP) and, therefore, for any business relationship to begin.

5.1.3 CHARACTERISTICS OF THE ADDITIONAL INFORMATION REQUESTED

In the process of registering a supplier (natural or legal person), in addition to the details requested on initial contact, the recommender must ask for the following information (Appendix IV):

- Documentary proof that the supplier is the holder of the current account into which Ferrer shall pay for the products or services received.
- The territory (country) in which the current account into which Ferrer shall pay for the products or services received is domiciled.

5.2 REVIEW OF THE ADDITIONAL INFORMATION REQUESTED

Accounting will be responsible for reviewing the additional information requested as a prerequisite for registering a supplier on the system (SAP).

In the event that any of the exceptional circumstances listed in the following paragraph come to light as a result of the review of the additional information provided, Treasury must be contacted to provide it with all of the information obtained to date. At this stage of the process, the supplier's approval will be put on hold.

These circumstances are listed below:

- The holder of the current account into which Ferrer is to make payments is different to the supplier (except in cases in which this circumstance can be contractually proven, in which case this proof must be reviewed by Treasury).
- The territory (country) in which the current account into which Ferrer is to settle accounts payable is different to where the supplier has its registered address.

Should there be no exceptional circumstances, Accounting will proceed to approve the supplier.

5.3 REVIEW AND ENQUIRY INTO EXCEPTIONAL CIRCUMSTANCES

Using the information provided by Accounting, Treasury must start a review process and contact the recommender and/or the potential supplier in order to collect further information.

Based on the information obtained, it will weigh up whether a business relationship with the supplier in question could entail the risk of money laundering and, therefore, will decide whether or not to approve the customer.

The final decision of whether or not to approve a supplier must be written up in a report by Treasury and sent to Accounting, Purchasing and the recommender so that the supplier approval process can proceed or be cancelled for good, depending on the circumstances.

5.4 SUBSEQUENT MODIFICATIONS TO SUPPLIER DETAILS

Subsequent to a supplier having been approved, it may request that modifications be made to its details that involve a change in the money laundering risk assessment conducted at the time of initial approval.

If a change in account number is requested, all of the supporting documents listed in section 5.1.3 of this policy must be obtained and, based on the information provided, an appraisal made of whether this could affect the initial money laundering risk assessment conducted.

6 APPLICATION OF THE POLICY TO EXISTING CUSTOMERS AND SUPPLIERS

The money laundering risk assessment of existing customers and suppliers at the time this policy is implemented shall be conducted by Treasury, which shall inform the recommenders of any cases detected so that the additional information required by law can be obtained.

APPENDIX I: RACI OVERVIEW

(R: recommender; C: consulted, A: approver, I: informed)

CUSTOMER APPROVAL		RECOMMENDER	CUSTOMER SERVICE	TREASURY	CFO
4.1	Filling in the KYC questionnaire.	R	I	-	-
4.2	Confirmation that the KYC questionnaire has been filled in.	C	R	-	-
4.2	Review of the KYC questionnaire and identification of exceptional circumstances involving money laundering.	I	I	R	-
4.2	Approval of customers not subject to exceptional circumstances.	I	I	R	-
4.3	Approval of customers subject to exceptional circumstances.	I	I	R	-
4.3	Request for review of findings that reject customer approval (form in Appendix III must be filled in).	R	-	I	I
4.3	Final customer approval.	I	-	I	(R:
4.4	Subsequent modifications to customer details.	I	R	R/C	-
4.4	Review and findings of money laundering risk assessment subsequent to modifications to customer details.	I	I/R	R	-

SUPPLIER APPROVAL		RECOMMENDER	PURCHASING	ACCOUNTING	TREASURY
5.1	Request for additional information to approve suppliers.	R	-	I	-
5.2	Review of the additional information.	-	-	R	-
5.2	Identification of exceptional circumstances involving money laundering.	I	I	R	C
5.2	Approval of suppliers not subject to exceptional circumstances.	I	I	R	-
5.3	Approval of suppliers subject to exceptional circumstances.	I	I	R	A
5.4	Identification of subsequent modifications to supplier details.	-	-	I/R	R/C
5.4.	Review and findings of money laundering risk assessment subsequent to modifications to supplier details.	I	-	I/R	R

APPENDIX II: CUSTOMER APPROVAL FORM

Steps for filling in the customer approval form and assessment of the need to fill in the KYC questionnaire:

Link to the form on TAG:

STEP 1:

Filling in the form under the "Customer approval" tab.

		
FORMULARIO CLIENTES		
Tipo de operación	Compañía que efectua la facturación	Agente comisionista
Alta Cliente ▼	_____ ▼	Si ▼
	Org. Vtas	
	0001 Ferrer Internacional ▼	Name of your agent:
Información General		
Nombre o Razón social	_____	
Dirección: (calle, número)	_____	
Código postal	_____	
País	España ▼	Si el país no es España, especificar país: _____
Ciudad	_____	
NIF/VAT	_____	
	Persona de contacto	_____
	E-mail:	_____
	Teléfono	_____
	Fax:	_____
Persona de contacto en Ferrer:	_____	
Datos de facturación		
Razón social:	_____	
Dirección: (calle,	_____	
Código postal/Población:	_____	
Ciudad/País	_____	
Persona de contacto:	_____	
Telefono contacto:	_____	
E-mail:	_____	
Entrega de mercancías		
Razón social:	_____	
Dirección: (calle,	_____	
Código postal/Población:	_____	
Ciudad/País	_____	
Persona de contacto:	_____	
Telefono contacto:	_____	
E-mail:	_____	

Condiciones de envío

INCOTERM:

**INCOTERM PRECIO PRODUCTO (en caso de que sea diferente a la condiciones de envío):

Información financiera

Medio de pago:

D Carta de crédito ▼

Condiciones de pago:

Z067 60 Dias Fecha de Embarque ▼

Si se ha especificado "Otras" en condiciones de pago, especificar (*):

Moneda de Facturación

▼

* Debe contar con el Ok del Dpto de tesorería

Información relevante en cumplimiento de la Lei 10/2010 de prevención del blanqueo de capitales

Es la empresa que ordenará los pagos?

Si

Realizara los pagos desde

Si

De acuerdo con la Ley Orgánica de Protección de Datos 15/1999 sus datos personales quedarán incorporados en un fichero automatizado, responsabilidad de Ferrer Internacional, S.A., que es procesado con la finalidad descrita en este formulario.

Firma

Posición

Fecha

STEP 2:

Review of the results under the "Checklist" tab.

CHECKLIST para la cumplimentación de cuestionario adicional	
Checklist 1	Ok
Checklist 2	Ok
Checklist 3	Ok
Checklist 4	Ok

The KYC questionnaire does NOT have to be filled in if the result of questions 1 to 4 on the checklist is **OK**.

If any of the four questions on the checklist is not OK, the KYC questionnaire must be filled in.

STEP 3:

Filling in the KYC questionnaire tab if applicable (see step 2).



FORMULARIO KYC

3. Estructura Organizativa	
3.1 Tipo de negocio	
<input type="text" value="Persona Física"/>	
Si la respuesta es "Otros", especificar:	
3.2 Identificador de los principales accionistas ⁽¹⁾	
Nombre	% Participación Accionarial
_____	_____
_____	_____
_____	_____
3.3 Información adicional	
Nº de trabajadores	_____
Facturación anual (en miles de euros)	_____

4. Referencias bancarias ⁽²⁾

Nombre de la entidad: _____
Dirección de la entidad _____
Persona de contacto _____
Teléfono _____

4.1. ¿Este es el banco desde el que se emitirán los pagos?

4.2. En el caso de que el titular de la cuenta bancaria emisora de los pagos NO sea la empresa especificada en "entrega de mercancías" Explicar la relación entre la empresa pagadora y la empresa receptora de la mercancía

5. Referencias de negocio ⁽³⁾

Nombre de la compañía _____
Dirección _____
Persona de contacto _____
Teléfono de contacto _____

Nombre de la compañía _____
Dirección _____
Persona de contacto _____
Teléfono de contacto _____

(*) Firma ⁽⁴⁾

Cargo:
Lugar y fecha

(*) Mediante la firma de este documento, se autoriza de manera expresa a Ferrer a poder contactar con las personas indicadas en "Referencias bancarias" y "Referencias de negocio".

Le informamos de que los datos que Vd. nos ha facilitado así como todos aquellos datos adicionales que nos facilite durante su relación con [Nombre de la Sociedad que realiza la Factura] serán incluidos en un fichero de nuestra titularidad, con la finalidad facilitar el desarrollo, cumplimiento y control de los servicios objeto de la relación contractual entre las partes y de cualesquiera otros servicios que preste posteriormente. Puede ejercitar sus derechos de acceso, rectificación, cancelación y oposición para los tratamientos realizados a GRUPO FERRER INTERNACIONAL S.A. con domicilio en Avda. Diagonal, 549, 5ª Planta, 08029, Barcelona o bien remitiendo un correo electrónico a la siguiente dirección: lopd@ferrer.com

APPENDIX III: REQUEST FOR THE REVIEW OF THE NON-APPROVAL OF A CUSTOMER

REQUEST FOR THE REVIEW OF THE NON-APPROVAL OF A CUSTOMER	
RECOMMENDER	
DEPARTMENT:	
CUSTOMER NAME:	
REASONS PROVIDED TO BE TAKEN INTO CONSIDERATION IN THE DECISIONS TO APPROVE/REJECT A CUSTOMER.	
APPLICANT'S SIGNATURE:	
SIGNATURE OF THE HEAD OF THE RECOMMENDER'S BUSINESS UNIT.	

APPENDIX IV: SUPPLIER APPROVAL FORM

Must be filled in by ALL suppliers with which a business relationship is to be started.

FERRER

ferrer
FORMULARIO PROVEEDOR- A RELLENAR CON MAYUSCULAS

Tipo de solicitud	Compañía	Codificación especial
ALTA		<input type="checkbox"/> Comisionista <input type="checkbox"/> Transportista <input type="checkbox"/> Delegación (IPAG) <input type="checkbox"/> Profesional :Retención: <input type="text"/>
Organización compras:		Grupo de compras:
Modo transporte: <small>(sólo extranjera)</small>		Portes / Incoterm:
Aduana: <small>(sólo extranjera)</small>		<input type="checkbox"/> Fondo de Comercio (sólo EXQ e ITQ) <input type="checkbox"/> Bonificación en especie
Categoría de compras:		

Datos generales

<input type="text"/>	
Nombre:	<input type="text"/>
Alias:	<input type="text"/>
Calle / Número:	<input type="text"/>
CP / Población:	<input type="text"/>
País:	<input type="text"/>
NIF:	<input type="text"/>
NIF Com.:	<input type="text"/>
Indique NIF	
Idioma:	<input type="text"/>
Teléfono*:	<input type="text"/>
Fax*:	<input type="text"/>
e-mail*:	<input type="text"/>
persona de contacto:	<input type="text"/>
* SIN ESPACIOS NI SIGNOS	
SERVICIO O BIEN QUE YA PROVEER:	<input type="text"/>

Datos financieros

Modalidad pago:	CONDICIONES PAGO:
TRANSFERENCIA ▼	30 días, día fijo 28 ▼ 2016
Vía de pago:	A
Divisa:	▼
COMENTARIOS:	<div style="border: 1px solid black; height: 40px;"></div>
Indique cuenta y/o IBAN	
Cuenta:	<input type="text"/>
IBAN:	<input type="text"/>
Swift code/BIC:	<input type="text"/>
ABA /Routing number:	<input type="text"/>
Nombre banco:	<input type="text"/>
Agencia/sucursal:	<input type="text"/>
Dirección banco:	<input type="text"/>
FACILITAR EVIDENCIA DOCUMENTAL QUE EVIDENCIE QUE EL PROVEEDOR ES TITULAR DEL NÚMERO DE CUENTA BANCARIA	

SUPPLIER FORM – TO BE FILLED IN USING BLOCK CAPITALS**Type of request****Company****Special code**

APPROVAL

Commission agent

Haulage carrier

Branch office

Professional

% Turnover

Purchasing organisation:

Purchasing group:

Mode of transport:

Carriage/Incoterm:

(Only if abroad)

Customs:

Goodwill (only EXQ and ITQ)

(Only if abroad)

Discount in kind

Purchase category

General details

Name:

Alias

Street/number

PC/City

Country

TIN

Language:

Com. TIN

Telephone no.:*

Fax:*

Email:*

Contact person:

State TIN

* WITHOUT SPACES OR SPECIAL CHARACTERS

SERVICE OR MERCHANDISE TO BE SUPPLIED

Payment details

Method of payment:
TRANSFER

Terms of payment:
30 days, fixed date = 28

Channel of payment: **A**

Currency:

COMMENTS:

State account number and/or IBAN

Account number:

IBAN:

SWIFT-BIC code:

ABA/Routing number:

Name of bank:

Branch:

Bank's address:

PROVIDE SUPPORTING DOCUMENTS THAT PROVE THE SUPPLIER IS THE HOLDER OF THE BANK ACCOUNT