STANDARD FORM FOR LISTING OF ENTITIES AND UNDERTAKINGS ON THE ISIL (DA'ESH) AND AL-QAIDA SANCTIONS LIST

Member States are requested to provide the following information to allow for the accurate and positive identification of the entity/undertaking. (For an entity that is a group, such as a terrorist group, please use the "Standard Form for Listing of Groups on the ISIL (Da'esh) and Al-Qaida Sanctions List"). Please leave blank any fields for which information is not available. For additional information or assistance in completing the form, please contact the Analytical Support and Sanctions Monitoring Team at: email:1267MT@un.org with copy to SC-1267-Committee@un.org. A link to the United Nations ISIL (Da'esh) and Al-Qaida sanctions list is provided for your reference *click here*.

I.A. KEY IDENTIFYING INFORMATI	ON						
Full name	(in Latin script)						
(this is the main name under which the	Original script (if not Latin)						
entity/undertaking will be listed)	Indicate script (for example, Arabic, Chinese, Russian):						
	Other scripts (if applicable):						
Acronym (if applicable)	(in Latin script)						
	Original script (if not Latin):						
	Indicate script (for example, Arabic, Chinese, Russian):						
Toma of outitules dout aline	Other scripts (indicate scripts, for example, Arabic, Chinese, Russian): 1. Company, partnership or other business entity ☐ Describe						
Type of entity/undertaking	(Including Subsidiary Company, Private Shareholding Company, Offshore Company,						
	Corporation, etc.)						
	2. Not-for-profit organization or nongovernmental organization						
	3. Foundation, Fund or charity undertaking						
	4. Sole proprietorship						
	5. Trust						
	6. Other Describe:						
Registration information	Registration number						
	Registration authority						
	Registered business/trade						
	name Designated principal address						
Licenses/certificates	Registered principal address Type of license						
Licenses/cer unicates	License number						
	Issuing Authority						
	Issuing date and expiry date						
Establishment	Place (street, city, state/province, country):						
	Day: Month: Year: Calendar:						
Operational areas T	Place (street, city, state/province, country):						
	Time frame (Month/Year — Month/Year): Calendar:						
	Place (street, city, state/province, country):						
	Time frame (Month/Year — Month/Year): Calendar:						
	Place (street, city, state/province, country):						
	Time frame (Month/Year — Month/Year): Calendar:						
Addresses	Current (street, city, state/province, country):						
(if applicable)	Dates:						
	Provious (street sity state/province country)						
	Previous (street, city, state/province, country): Dates:						
I.B. ALIASES/AKAS/FKAS							
Please leave blank any fields for which infor	rmation in not available.						

(in Latin script)

Also-Known-As (AKA)

(including Formerly-Kı	nown-As (FKA) names)	Original script (if not Latin)				
		Indicate script (for example, Arabic, Chinese, Russian):				
		Other scripts (if applicable):				
Type of AKA		☐ Name variation ☐ Spelling variation ☐ Formerly-Known-As (FKA)				
		Other, explain:				
Acronym		(in Latin script):				
(if applicable)		Original script (if not Latin):				
		Indicate script (for example, Arabic, Chinese, Russian):				
04 16 41 1	4.4.41.4.477.4	Other scripts (if applicable):				
Other information rel	evant to this AKA					
Also-Known-As (AKA	7)	(in Latin script)				
	nown-As (FKA) names)	Original script (if not Latin)				
		Indicate script (for example, Arabic, Chinese, Russian):				
		Other scripts (if applicable):				
Type of AKA		☐ Name variation ☐ Spelling variation ☐ Formerly-Known-As (FKA)				
		Other, explain:				
Acronym		(in Latin script):				
(if applicable)		Original script (if not Latin):				
		Indicate script (for example, Arabic, Chinese, Russian):				
		Other scripts (if applicable):				
Other information rel	evant to this AKA					
Also-Known-As (AKA		(in Latin script)				
(including Formerly-Ki	nown-As (FKA) names)	Original script (if not Latin)				
		Indicate script (for example, Arabic, Chinese, Russian):				
		Other scripts (if applicable):				
Type of AKA		☐ Name variation ☐ Spelling variation ☐ Formerly-Known-As (FKA)				
A		Other, explain:				
Acronym		(in Latin script):				
(if applicable)		Original script (if not Latin): Indicate script (for example, Arabic, Chinese, Russian):				
		Other scripts (if applicable):				
Other information relevant to this AKA		Other scripts (if applicable).				
Other information ref	evant to this AKA					
Other information						
Logo/flag/seal used by	the entity/undertaking					
Social media credentia	als (all platforms)					
I.C. Owners, direct	ors, managers and off	icers				
		mation in not available.				
	nanagers and officers					
PRN	(Permanent Reference N	(umber if listed)				
Full name	(in Latin script)					
	(in Latin script) Original script (if not Latin)					
	Indicate script (if not Latin) Indicate script (for example, Arabic, Chinese, Russian): Other scripts (if applicable):					
Birth data						
Diffu uata	Place (street, city, state/province, country):					
Nationality,	Day: Month:	Year: Calendar:				
citizenship (current						
and past, add dates						
when granted,						
revoked, annulled,						
withdrawn, if known)						
States of residence						

Address or location (current and past)	Place (street, city, state/province, country) and date (day, month, year, calendar):
Identity and travel document	(describe nationality, type, issued by, issued at, issue date, issued to, place and date of birth as documented)
Physical description	(male/female/gender, /tribal/ethnic background, other details)
AKAs	(include alias in original/other scripts (describe), type of AKAs (good or low quality), birth data and nationality under each AKAs, any additional information)
Any other relevant information	

Owners, directors, r	managers and officers			
PRN	(Permanent Reference Number if listed)			
Full name	(in Latin script)			
	Original script (if not Latin)			
	Indicate script (for example, Arabic,	Chinese, Russian):		
	Other scripts (if applicable):			
Birth data	Place (street, city, state/province, o	country):		
	Day: Month:	Year:	Calendar:	
Nationality,				
citizenship (current and past, add dates				
when granted,				
revoked, annulled,				
withdrawn, if known)				
States of residence				
Address or location	Place (street, city, state/province, cour	ntry) and date (day, month,	year, calendar):	
(current and past)				
Identity and travel	(describe nationality, type, issued by,	issued at, issue date, issued	to, place and date of birth as documented)	
document	(1 (6 1 / 1 / 1 1 / 1 1 / 1			
Physical description	(male/female/gender, /tribal/ethnic bac			
AKAs			good or low quality), birth data and nationality under	
	each AKAs, any additional informatio	on)		
Any other relevant				
information				

Owners, directors, 1	nanagers and officers			
PRN	(Permanent Reference Number if listed)			
Full name	(in Latin script)			
	Original script (if not Lati	in)		
	Indicate script (for examp	le, Arabic, Chinese, Ru	ssian):	
	Other scripts (if applicabl	e):		
Birth data	Place (street, city, state/j	province, country):		
	Day: Month:		Year:	Calendar:
Nationality, citizenship (current and past, add dates when granted, revoked, annulled, withdrawn, if known) States of residence				
Address or location (current and past)	Place (street, city, state/pro	vince, country) and date	e (day, month,	year, calendar):
Identity and travel document	(describe nationality, type,	issued by, issued at, iss	ue date, issued	to, place and date of birth as documented)
Physical description	(male/female/gender, /triba	d/ethnic background, of	her details)	
AKAs	(include alias in original/ot each AKAs, any additional		ype of AKAs (g	good or low quality), birth data and nationality under
Any other relevant information				

I.D. Organizational linkages, associated and affiliated groups, entities and undertakings

Please describe all bi	ranches, subsidiaries, parent organization and/or sister branches. Please leave blank any fields for which
information in not av	vailable.
Associated and affi	iliated groups, entities, undertakings
PRN	(Permanent Reference Number if listed)
Full name	(in Latin script)
	Original script (if not Latin)
	Indicate script (for example, Arabic, Chinese, Russian):
	Other scripts (if applicable):
Establishment data (multiple, if applicable)	Place (street, city, state/province, country) and date (day, month, year, calendar):
Type, activities	(Current and past, dates)
Address or location (current and past)	Place (street, city, state/province, country) and date (day, month, year, calendar):
Registration and other numbers	(describe nationality, type, issued by, issued at, issue date, issued to, comments)
Financial information	(known assets, major funding sources)
AKAs	(include AKAs in original/other scripts (describe), type of AKAs, any additional information)
Any other relevant information	

Associated and affi	lliated groups, entities, undertakings
PRN	(Permanent Reference Number if listed)
Full name	(in Latin script)
	Original script (if not Latin)
	Indicate script (for example, Arabic, Chinese, Russian):
	Other scripts (if applicable):
Establishment data (multiple, if applicable)	Place (street, city, state/province, country) and date (day, month, year, calendar):
Type, activities	(Current and past, dates)
Address or location (current and past)	Place (street, city, state/province, country) and date (day, month, year, calendar):
Registration and other numbers	(describe nationality, type, issued by, issued at, issue date, issued to, comments)
Financial information	(known assets, major funding sources)
AKAs	(include AKAs in original/other scripts (describe), type of AKAs, any additional information)
Any other relevant information	

Associated and affi	liated groups, entities, undertakings
PRN	(Permanent Reference Number if listed)
Full name	(in Latin script)
	Original script (if not Latin)
	Indicate script (for example, Arabic, Chinese, Russian):
	Other scripts (if applicable):
Establishment data (multiple, if applicable)	Place (street, city, state/province, country) and date (day, month, year, calendar):
Type, activities	(Current and past, dates)
Address or location (current and past)	Place (street, city, state/province, country) and date (day, month, year, calendar):
Registration and other numbers	(describe nationality, type, issued by, issued at, issue date, issued to, comments)
Financial information	(known assets, major funding sources)

AKAs	(include AKA	As in original/other scri	pts	(describe), type of AKAs, any additional information)
Any other relevant information				
mormation				
I.E. OTHER INFO	DMATION			
Legal Status		nanatian	_	<u> </u>
(Commercial)	In business/o		片는]
(Commercial)	Bankrupted	efunct or ended	┝	<u>]</u>
		erunct or ended	L	
	Merger			
	Split-up Other		┝	Describe:
Legal Status	Indicted/Cha	rand	┞┖	Describe:
(Judicial: applicable		Convicted/Sentenced		
to jurisdictions with		ate whether the entity		
criminal liability of	has been convicted, sentenced,			
legal entities)		has any other		
	relevant legal	status and provide		
		including details on		
		e of offense and the ction/sentence)		
	Other (please	e provide information		
	on any other	legal action taken by		
	or against the	entity)		
		ecurity measures		
		ate whether any of measures have been		
		eizure of property b)		
		nds c) seizure of		
	items d) closing facilities e) ban on conducting business or other activities f) loss of certain licenses, approvals, concessions, subsidies or other forms of public incentives g) termination of certain activity or transaction h) prohibition of acquisition of			
		i) prohibition of		
		ertain activity or) prohibition of		
	participation	in the public		
	procurement procedure k)			
	prohibition of	f acquiring certain		
	licenses, approvals, concessions, subsidies or other forms of public			
	incentives.			
Existing INTERPOL	Notices		Y	es NoNot Known
				yes, please explain:
Website address				7 P Authoriti
TOODSIEC MAAI COD				
			<u> </u>	
I.F. FINANCIAL I	NFORMATI	ON		
Known assets		Value		
		Bank account		
	Funds	Bank ID		
	Cash	Value		
	equivalents,	Category and		
	Stocks,	term		
	bonds,	Digital wallet		
	mutual fund,	addresses		
	virtual	Regulators		
L		ı - L		

I.F. FINANCIAL I	NFORMATI	ION		
	assets, and other financial assets			
		Value		
		Address		
	Property	Registration number		
		Registration Authority		
	Other assets and	Value		
econor	economic resources	Category		
Major funding	Donations [<u> </u>		
sources		crimes, Specify if possible		
	Crowdfunding platforms			
	Others, please explain:			
I.G. OTHER INFO	RMATION I	NOT SPECIFIED ABOVE		

AN DARKE FOR A MORPHO
II. BASIS FOR LISTING
Member States are requested to indicate in one or more of the fields below the association between the entity/undertaking
inscribed in section I of this form and ISIL or Al-Qaida (including on the ISIL (Da'esh) and Al-Qaida Sanctions List). Please
include the permanent reference number(s) of those names which the entity/undertaking is associated with that already appear on
the ISIL (Da'esh) and Al-Qaida Sanctions List. In the event of the designation of this entity/undertaking by the Committee, the
information provided will be used for the development of the narrative summary of reasons for listing to be published on the
Committee's website. If relevant, please also incorporate listing criteria information into the Statement of Case in Section III of
this form.
(a) Participating in the financing, planning, facilitating, preparing, or perpetrating of acts or activities by, in conjunction with, under the name
of, on behalf of, or in support of Al-Qaida, ISIL, or any cell, affiliate, splinter group or derivate thereof.
• Name(s) and permanent reference number(s) (QDi. or QDe.) on the ISIL (Da'esh) and Al-Qaida Sanctions List (if applicable):
Name(s) and permanent reference number(s) (QDI: of QDE:) on the 15TE (Da esh) and Al-Qanda Sanetions East (if applicable).
(b) Supplying, selling or transferring arms and related materiel to Al-Qaida, ISIL, or any cell, affiliate, splinter group or derivate thereof.
• Name(s) and permanent reference number(s) (QDi. or QDe.) on the ISIL (Da'esh) and Al-Qaida Sanctions List (if applicable):
Name(s) and permanent reference number(s) (QDI. of QDE.) on the ISIL (Da esti) and AI-Qaida Sanctions. List (if applicable).
(c) Recruiting for Al-Qaida, ISIL, or any cell, affiliate, splinter group or derivate thereof.
• Name(s) and permanent reference number(s) (QDi. or QDe.) on the ISIL (Da'esh) and Al-Qaida Sanctions List (if applicable):
(d) otherwise supporting acts or activities of Al-Qaida, ISIL, or any cell, affiliate, splinter group or derivate thereof.
• Name(s) and permanent reference number(s) (QDi. or QDe.) on the ISIL (Da'esh) and Al-Qaida Sanctions List (if applicable):
(e) either owned or controlled, directly or indirectly, by, or otherwise supporting, any individual, group, undertaking or entity associated with
Al-Qaida or ISIL, including on the ISIL (Da'esh) and Al-Qaida Sanctions List.
• Name and permanent reference number(s) (QDi. or QDe.) on the ISIL (Da'esh) and Al-Qaida Sanctions List (if applicable):
.* Name and permanent reference number(s) (QDI. of QDE.) on the 1312 (Da esti) and Al-Qaida Sanctions List (if applicable).
(f) Other acts or activities indicating association with Al-Qaida, ISIL, or any cell, affiliate, splinter group or derivative thereof
• Name and permanent reference number(s) (QDi. or QDe.) on the ISIL (Da'esh) and Al-Qaida Sanctions List (if applicable):
• Nature of such acts or activities:

III. STATEMENT OF CASE The statement of case shall be releasable, upon request, except for the parts a Member State identifies as being confidential to the Committee and may be used to develop the narrative summary of reasons for listing.
III.A. STATEMENT OF CASE (RELEASABLE UPON REQUEST) The statement of case should provide as much detail as possible on the basis(es) for listing, including: (i) specific information supporting a determination that the entity/undertaking meets the criteria above; (ii) the nature of the information, for example, intelligence, law enforcement, judicial, media, and admissions by subject; and (iii) additional information or documents provided with the submission. States should include details of any connection between the entity/undertaking proposed for listing and any currently listed individual or entity.
III.B. PARTS OF STATEMENT OF CASE IDENTIFIED AS BEING CONFIDENTIAL TO THE COMMITTEE
INDITION OF STATEMENT OF CHISCOCKINE TO THE COMMITTEE

IV. IDENTITY OF DESIGNATING STATE.	
Pursuant to paragraph 46 of resolution 2253 (2015), Member States proposing a new listing shall specify if the Committee or the	
Ombudsperson may not make known the Member State's status as a designating State.	
Specify if the Committee or the Ombudsperson:	
May make known the Member State's status as a designating State	
☐ May not make known the Member State's status as a designating State	
V. INTERPOL COOPERATION	
Pursuant to paragraph 45 of resolution 2253 (2015), Member States shall provide the Committee with as much relevant	
information as possible on the proposed name, in particular sufficient identifying information to allow for the accurate and	
positive identification of individuals, groups, undertakings and entities, and to the extent possible, the information required by INTERPOL to issue an INTERPOL-United Nations Security Council Special Notice.	
INTERIOL to issue an INTERIOL-Omica Nations Security Council special Notice.	
INTERPOL may for implementation purposes wish to contact the relevant authorities in your country, with a view to obtaining additional	
information on the entity/undertaking proposed for designation herewith. For this purpose, please indicate below if the Committee may inform	
INTERPOL, upon INTERPOL's request, that your country is a designating State of the above-mentioned entity/undertaking (INTERPOL would	
then contact your country's permanent mission to the United Nations in New York with the relevant inquiries). Yes No	
In addition, please indicate below if the Committee may convey to INTERPOL, upon INTERPOL's request, the details of the point of contact	
below within your Government (INTERPOL may then contact directly the contact point below with the relevant inquiries).	
Yes No	
VI. POINT OF CONTACT	
The individual(s) below may serve as a point-of-contact for further questions on this submission:	
(THIS INFORMATION SHALL REMAIN CONFIDENTIAL)	•
Name:	Position/Title:
Contact details:	
Office:	
Address:	
Telephone number:	
Fax number:	
E-mail address:	