Investor Identification Form

Praemium Australia Limited ABN 92 117 611 784 AFS Licence Number 297956 (Praemium)



Important information

Praemium must comply with the Anti-Money Laundering and Counter-Terrorism Financing laws ('the AML Legislation'), which requires us to, among other things, establish your identity.

This form is provided to collect the necessary customer information as required by the AML Legislation to establish your identity. For your application to be processed by Praemium, you must ensure that this form as well as your application form is completed and forwarded to us.

By completing this investor identification form and providing us with information to establish your identity, you acknowledge and agree:

- this information will be used by Praemium Australia Limited to establish your identity for the purposes of the AML Legislation;
- ▶ Praemium Australia Limited will neither be responsible nor liable to you or any other person for any loss suffered where transactions are delayed, blocked, frozen or where Praemium declines to process a transaction or ceases to provide you with a product or service, in circumstances where Praemium is unable to establish your identity or where Praemium reasonably believes you are a Proscribed Person¹.

When completing this form

Depending on your investor type, Praemium may require supporting identification/verification documentation to establish your identity.

Where such identification/verification documentation is required, an originally certified copy is required. An abbreviated list of the various people that can certify documents is provided on the next page with an extended list of certifiers available on our website www.praemium.com.au

Will documents in a language other than English be accepted?

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above.

Which sections of this form apply to me?

The matrix below highlights the section of this form that are applicable to each investor type. Please ensure that you read the section applicable to you and where relevant attach an originally certified copy of the document before sending it to Praemium.

1. A 'Proscribed Person' means any person or entity who Praemium reasonably believes to be (i) in breach of the laws of any jurisdiction regarding economic or trade sanctions, or laws prohibiting money laundering or terrorism financing, or (ii) on a list of persons with whom dealings are proscribed by Australian laws or the laws of another recognised jurisdiction. A 'Proscribed Person' includes any person or entity who Praemium reasonably believes to act on behalf, or for the benefit of, a person or entity referred to in (i) and/or (ii).

Investor Type ²	Section A	Section B	Section C	Section D	Section E	Section F	Section G	Section H
Individual(s) & Sole Traders	~	>						
Trust Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund	•	>		>				
Domestic (Australian) Company	~		>					
Trust Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund	•		>	>				
Government Body	~				~			
Partnership	~					~		
Association	~						~	
Registered Co-operative	~							>
Foreign Company ³								
Foreign Company acting as a Corporate Trustee(s) of a Trust ³								

^{2.} Please see page 3 of this Investor Identification Form for a description of each investor type.

^{3.} Please contact us to request the Foreign Corporate Entity form. Email support@praemium.com.au.

Certifying AML documents

An originally certified copy is a copy of a document that has been certified as a true copy of an original document.

To obtain an originally certified copy, present the original AML document and a photocopy of that document to one of the people listed below. The person certifying the document will need to include the following information on the photocopy:

- "I certify that this is a true copy of the original document"; and
- the certifier's:
 - full name
 - occupation, qualification, position or registration number (if any), which makes them eligible to certify documents;
- the date the document was signed and the certifier's signature.

If this certification does not appear, you may be asked for new certified documents.

Who can certify AML documents

OCCUPATIONS

- A person who, under a law in force in an Australian State or Territory, is currently licensed or registered to practise in the following occupations:
 - Dentist
 - Legal practitioner
 - Medical practitioner
 - Pharmacist

OTHER PERSONS

- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- ➤ An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more years of continuous service with one or more licensees
- ▶ Bank officer with 2 or more continuous years of service
- Building society officer with 2 or more years of continuous service
- Credit union officer with 2 or more years of continuous service
- ▶ Employee of the Commonwealth who is:
 - in a country or place outside Australia; and
 - authorised under paragraph 3(c) of the Consular Fees Act 1955; and
 - exercising his or her function in that place
- Justice of the Peace
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- Minister of religion registered under Subdivision A of Division
 1 of Part IV of the Marriage Act 1961
- Notary public
- ▶ Permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- Permanent employee of:
 - the Commonwealth or a Commonwealth authority; or
 - a State or Territory or a State or Territory authority; or
 - a local government authority;

with 2 or more years of continuous service

- Police officer
- ▶ Sheriff
- Sheriff's officer
- Teacher employed on a full-time basis at a school or tertiary education institution

What type of investor am I?

Type of investor	Description
Individual(s) & Sole Traders	Investing in your personal capacity – that is, not as a company, trust, partnership, etc. This can include individuals investing on behalf of a person under the age of 18. Sole Trader describes a business that is owned and controlled by one person, although the business may employ people.
Trust Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund	Investing in your personal capacity as a trustee on behalf of another. (In this case, the trustee is not a company) A trust will in most circumstances be established pursuant to a trust deed with the intention of holding income or property on behalf and for the benefit of another (who may or may not include the trustee). Trusts can include: Superannuation funds (including self managed superannuation funds) Family trusts Deceased estate Managed investment scheme (registered or unregistered) Charitable trust Testamentary trust
Domestic (Australian) Company	Company incorporated in Australia, including:
	Proprietary company (ending with 'Pty Ltd')
	 Public company (ending with 'Ltd') Companies limited by guarantee (used primarily by non-profit organisations) Listed company (listed on a securities exchange in Australia such as the ASX)
Trust Domestic (Australian) Company acting as a Trustee of a Trust or Superannuation Fund	Company incorporated in Australia, acting in the capacity of trustee on behalf of another (for example, ABC Pty Ltd as trustee for the XYZ self-managed superannuation fund). A trust will in most circumstances be established pursuant to a trust deed with the intention of holding income or property on behalf and for the benefit of another (who may or may not include the trustee).
	Trusts can include: Superannuation funds (including self managed superannuation funds)
	Family trusts Deceased estate
	 Managed investment scheme (registered or unregistered)
	Charitable trustTestamentary trust
Partnership	Formally established pursuant to a partnership agreement/deed. If you are investing 'jointly' (and not pursuant to a formal partnership agreement) then see 'Individual(s)' section above.
Association	Incorporated Association is registered by the State or Territory in which the association is based.
	Features include: Appointment of a public officer and committee
	Profits, if any, can only be used to promote non-profit objectives
	Unincorporated Association does not have a legal identity and cannot hold assets in its own name. It must appoint individuals as trustees, who own the assets but hold them for the benefit of the association.
Registered Co-operative	Registered Co-operative is a democratic structure owned and controlled by the people it serves, who join together for a common benefit. It is a separate legal entity (registered under the relevant State or Territory legislation) with the general aim of providing services for its members rather than making profits.
Government Body	Government Body is a legal entity that is owned or controlled by Federal, State or Local Government. Examples include Universities, Local Councils, and Statutory Agencies.
Foreign Company ¹	Company incorporated in a foreign jurisdiction.
Foreign Company acting as a Corporate Trustee(s) of a Trust ¹	Company incorporated in a foreign jurisdiction, acting in the capacity of a trustee on behalf of another. A trust will in most circumstances be established pursuant to a trust deed with the intention of holding income or property on behalf and for the benefit of another (who may or may not include the trustee). Trusts can include:
	Family trusts
	Deceased estate
	Managed investment scheme (registered or unregistered)Charitable trust
	 Testamentary trust Pension scheme/Retirement fund
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 $^{1.\} Please\ contact\ us\ to\ request\ the\ Foreign\ Corporate\ Entity\ form.\ Email\ support @praemium.com.au.$

Section A. Politically Exposed Person All investors must complete this section.

SECTION A1				
Are you or any of the beneficial owners a politically exposed person?				
Yes No				
A 'Politically exposed person' (PEP) is defined as an individual:				
A Politically exposed person' (PEP) is defined as an individual: (1) who holds a prominent public position or function in a government body or an international organisation, including: Head of State or head of a country or government; or government minister or equivalent senior politician; or senior government official; or Judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge of a court of equivalent seniority in a foreign country or international organisation; or governor of a central bank or any other position that has comparable influence to the Governor of the Reserve Bank of Australia; or senior foreign representative, ambassador, or high commissioner; or high-ranking member of the armed forces; or board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation; and (2) who is an immediate family member of a person referred to in the above paragraph, including: a spouse; or a de facto partner; or a child and a child's spouse or de facto partner; or a parent; and (3) who is a close associate of a person referred to in paragraph (1), which means any individual who is known (having regard to information that is public or readily available) to have: joint beneficial ownership of a legal entity or legal arrangement with that person; or				
If YES, please identify which investor/beneficial owner is the politically exposed person and the type of politically exposed person:				
Full given name(s)	Full given name(s)			
Surname	Surname			
Domestic PEP Foreign PEP International Organisation PEP	Domestic PEP Foreign PEP International Organisation PEP			
Domestic PEP means a politically exposed person of an Australian government body.				
Foreign PEP means a politically exposed person of a government body of a foreign country. International organisation PEP means a politically exposed person of an international organisation.				

This is the end of Section A. Please submit this form together with the completed application form.

Section B. Individual(s), Sole Trader(s) and Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund

SECTION B1	
Individual (Investor 1/Trustee 1)	
Full given name(s)	Address details
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode Country (if not Australia)
	Country (ii not Austratia)
Individual (Investor 2/Trustee 2) if applicable	
Full given name(s)	Address details
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode Country (if not Australia)
	estantly in nervice daily
Individual (Investor 3/Trustee 3) if applicable	
Full given name(s)	Address details
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	State Postcode
	Country (if not Australia)
	SSERIE (III TOC / MOST MING)
Individual(s) that are not sole trader(s) – This is the end of Section B. F	Please submit this form together with the completed application form.
Individual(s) acting as sole trader(s) – Proceed to Section B2.	
Individual(s) acting as a Trustee(s) - Proceed to Section D - Trusts or S	
or superannuation fund, please provide details on a separate sheet and	attach to this form.

SECTION B2		
COMPLETE THIS SECTION B2 IF INVESTOR 1 IS A SOLE TRADER. If more than one individual is a sole trader, please provide details on Full business name (if any)	a separate sheet for those individuals and attach to this form.	
	2	
ABN (if any) Principal place of business (if any)		
	Street address (PO Box is not acceptable)	
	Suburb	
	State Postcode	
	Country (if not Australia)	

This is the end of Section B. Please submit this form together with the completed application form.

Praemium will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information set out below.

Part I - Acceptable primary ID documents

Select **ONE** valid option from this section only:

- Australian State/Territory driver's licence containing a photograph of the person
- Australian passport (a passport that has expired within the preceding 2 years is acceptable)
- Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
- Foreign passport or similar travel document containing a photograph and the signature of the person*

Part II - Acceptable secondary ID documents

Should only be presented if the individual does not own a document from Part I.

Select **ONE** valid option from this section:

- Australian birth certificate
- Australian citizenship certificate
- Pension card issued by Centrelink
- Health card issued by Centrelink

AND ONE valid option from this section:

▶ A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address

- ▶ A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address. Block out the TFN before scanning, copying or storing this document.
- ▶ A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address)
- ▶ If under the age of 18, a notice that: was issued to the individual by a school principal within the preceding 3 months; and contains the name and residential address; and records the period of time that the individual attended the school

Part III - Acceptable foreign ID documents

Should only be presented if the individual <u>does not</u> own a document from Part I.

<u>BOTH</u> documents from this section must be presented:

- Foreign driver's licence that contains a photograph of the person in whose name it is issued and the individual's date of birth*
- ▶ National ID card issued by a foreign government containing a photograph and a signature of the person in whose name the card was issued*
- * Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above.

Section C. Australian Company

If you are:

a) a Domestic (Australian) Company, complete this Section C; or

b) a Domestic (Australian) Company acting as a Corporate Trustee of a Trust/Superannuation Fund, complete this Section C as well as Section D.

SECTION C1		
GENERAL INFORMATION		
Full name as registered by ASIC		
ACN		
Principal place of business (if any)		Registered office address
Street address (PO Box is not acceptabl	le)	Street address (PO Box is not acceptable)
Suburb		Suburb
	stcode	State Postcode
Country (if not Australia)		Country (if not Australia)
REGULATORY/LISTING DETAILS Please select ✓ and provide ONE of the Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator) Australian listed company Majority-owned subsidiary of an Australian listed company	following (if applicable): Regulator name Licence details Name of market/exchange Australian listed company name Name of market/exchange	
None of the above Please go to Section C3		
SECTION C3		
COMPANY TYPE		
Please select ✔ and provide ONE of the	following:	
Proprietary ("Pty Ltd") – please provide details (in Section C4) and the sharehous Section C5) if applicable		Public – no further information is required. Please submit this form together with the completed application form. If you are a Public Company acting as Corporate Trustee, Proceed to Section D. – Trusts or Superapputation Funds

SECTION C4	
DIRECTOR(S) (only needs to be completed for proprietary compar	nies)
This section does NOT need to be completed for public and listed cor	mpanies.
How many directors are there?	each director.
Director 1	
Full given name(s)	Address details of Director 1
r utt given name(s)	Residential street address (PO Box is not acceptable)
Surname	itesidential street dudress (i o box is not deceptable)
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
Director 2	
Full given name(s)	Address details of Director 2
	Residential street address (PO Box is not acceptable)
Surname	
	_
Date of birth (dd/mm/yyyy)	Cubunk
	State Postcode
	Country (if not Australia)
	Status (three table day)
Director 3	
Full given name(s)	Address details of Director 3
Surname	Residential street address (PO Box is not acceptable)
	<u> </u>
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
Director 4	
Full given name(s)	Address details of Director 4
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode Country (if not Australia)
	Country (if not Australia)
If there are more directors, provide details on a separate sheet and a	attached to this form.
Regulated company (as selected in Section C2) - no further information	tion is required.
Regulated company (as selected in Section C2) acting as a Corporat	re Trustee – Proceed to Section D – Trusts or Superannuation Funds.
Proprietary company that is not regulated – please provide Shareho	
Proprietary company that is not regulated and acting as a Corporate to Section D.	e Trustee – Please provide shareholder details in Section C5 and then proceed

SECTION C5		
SHAREHOLDERS (only needs to be completed for proprietary companies that are not regulated companies as selected in Section C2).		
Provide details of ALL individuals who are beneficial owners through one of	or more shareholdings of more than 25% of the company's issued capital.	
Shareholder 1		
Full given name(s)	Address details of Shareholder 1	
	Residential street address (PO Box is not acceptable)	
Surname		
	Suburb	
	State Postcode	
	Country (if not Australia)	
Shareholder 2		
Full given name(s)	Address details of Shareholder 2	
	Residential street address (PO Box is not acceptable)	
Surname		
	Suburb	
	State Postcode	
	Country (if not Australia)	
Shareholder 3		
Full given name(s)	Address details of Shareholder 3	
	Residential street address (PO Box is not acceptable)	
Surname	Note that the set add see (if a Basile line addeption)	
	Suburb	
	State Postcode	
	Country (if not Australia)	
	odata y (it not rudit did)	

This is the end of Section C. Please submit this form together with the completed application form. If you are a Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund, also complete and submit Section D.

Praemium will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information.

Section D. Trusts or Superannuation Funds

If you are:

- a) an Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund, complete this Section D as well as Section B.
- b) a Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund, complete this Section D as well as Section C.

ull business name (if any)		
ountry where Trust estab	lished	
ECTION D2		
YPE OF TRUST	e following and provide the detail requested:	
Regulated trust	Provide name of the regulator (e.g. ASIC, APRA)	
	Provide the trust's ABN or registration/licensing details	Please submit this Section D, together with the completed application form. If you are: • an Individual acting as
Government superannuation fund	Provide name of the legislation establishing the fund	Trustee of a Trust or Superannuation Fund, also complete and submit Section B; OR
Registered managed investment scheme	Provide Australian Registered Scheme Number (ARSN)	 a Domestic (Australian) Company acting as a Corporate Trustee of a Tru or Superannuation Fund, also complete and submit
Other trust type (e.g. Self Managed Superannuation Fund)	Please specify Trust description (e.g. family discretionary or unit trust, testamentary trust, charitable, estate, SMSF)	Section C.
	Provide the trust's ABN or registration/licensing details (if any).	
	Provide full name of Settlor (unless the material asset contribution to the trust by the settlor at the time the trust is established is less than \$10,000 or the settlor is deceased). Full given name(s)	Complete Section D3 and D4 and provide the documents requested on page 12 of this Investor Identification Form.
	Surname	

Surname Date of birth (dd/mm/yyyy) / / Su Sta Co Beneficiary 2 Full given name(s) Addi Re Surname Date of birth (dd/mm/yyyy) / / Su Sta Co Beneficiary 3 Full given name(s) Addi	Go to Section D4 ress details of Beneficiary 1 sidential street address (PO Box is not acceptable)
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Surname	
Date of birth (dd/mm/yyyy)	
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Beneficiary 4	
Full given name(s) Addi	ess details of Beneficiary 4
Re	sidential street address (PO Box is not acceptable)
Surname	· ·
Date of birth (dd/mm/yyyy)	
/ / Su	
Sta	purb
Co	
	te Postcode
If there are more than four beneficiaries, please provide details on a separate she	

	and address of all trustees below unless this information has already
Trustee 1	all trustees in Section B or Section C. Residential address if an individual trustee OR company register
Full given name(s) or Company name	office address (PO Box is NOT acceptable)
Gurname	
	Suburb
	State Postcode
	Country (if not Australia)
Trustee 2	Residential address if an individual trustee OR company register
Full given name(s) or Company name	office address (PO Box is NOT acceptable)
Surname	
	Suburb
	State Postcode
ull given name(s) or Company name	State Postcode Country (if not Australia)
Full given name(s) or Company name	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable)
Full given name(s) or Company name	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable) Suburb
full given name(s) or Company name	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable)
Full given name(s) or Company name Gurname Trustee 4	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable) Suburb State Postcode Country (if not Australia)
Full given name(s) or Company name Surname Frustee 4 Full given name(s) or Company name	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable) Suburb State Postcode Country (if not Australia) Residential address if an individual trustee OR company register
Full given name(s) or Company name Surname Frustee 4 Full given name(s) or Company name	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable) Suburb State Postcode Country (if not Australia) Residential address if an individual trustee OR company register
Full given name(s) or Company name Surname Frustee 4 Full given name(s) or Company name	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable) Suburb State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable)
Frustee 3 Full given name(s) or Company name Gurname Frustee 4 Full given name(s) or Company name Gurname	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable) Suburb State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable) Suburb
Full given name(s) or Company name Furstee 4 Full given name(s) or Company name	State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable) Suburb State Postcode Country (if not Australia) Residential address if an individual trustee OR company register office address (PO Box is NOT acceptable)

This is the end of Section D. Please submit this form, together with the completed application form. If you are:

- > an Individual acting as Trustee of a Trust or Superannuation Fund, also complete and submit Section B; OR
- a Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund, also complete and submit Section C.

SECTION DA

Section E. Government Body

CECTION E4	•	
SECTION E1		
GENERAL INFORMATION		
Full name of Government Bo	dy	
Principal place of operations		
Street address (PO Box is n	ot acceptable)	
Suburb		
State	Postcode	
Country		
SECTION E2		
GOVERNMENT INFORMATION	A.	
		and provide the information requested.
Commonwealth of Austra		
- Commonweath of Austra	aa ooteriiiieiit boay	Please specify the State or Territory
Australian State or Territ	ory Government Body	
		Please specify Foreign Country
Foreign Country Governm	ient Body	

This is the end of Section E. Please submit this form together with the completed application form. Praemium will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information.

Section F. Partnerships

SECTION F1	
GENERAL INFORMATION	
Full name of Partnership	
·	
Registered business name of Partnership (if any)	
Country where Partnership established	
CECTION E2	
SECTION F2	
TYPE OF PARTNERSHIP	
Please select ✓ only ONE of the following partnership types and provid	le the information requested.
Is the partnership regulated by a professional association?	
Yes	No
Provide the name of the association	How many partners are there?
Provide membership details (eg membership number)	If you selected No, go to Section F3 and provide the details for <u>all</u> partners.
If you selected Yes, go to Section F3 and provide the details for <u>one</u> partner only.	

SECTION F3	
PARTNERSHIP DETAILS If the partnership IS regulated by a professional association (as sele If the partnership is NOT regulated by a professional association (as of the partnership.	
Partner 1	
Full given name(s)	Address details of Partner 1
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth	
	Suburb
	State Postcode
	Country (if not Australia)
Partner 2	
Full given name(s)	Address details of Partner 2
Tall grown mannetor,	Residential street address (PO Box is not acceptable)
Surname	residential street address (i o Box is not deceptable)
Date of birth (dd/mm/yyyy)	
/ /	Suburb
, ,	State Postcode
	Country (if not Australia)
Partner 3	
Full given name(s)	Address details of Partner 3
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
If the partnership is NOT regulated by a professional association and the attach to this form. Please read "Partnership verification procedure" below and provide us	ere are more than three partners, provide details on a separate sheet and s with the documents requested.
Partnership verification procedure.	
You will need to provide us with one document from Part I and c association) as shown below (please ✔).	one form Part II (if the partnership is regulated by a professional
Part I – Acceptable ID documents (to verify partnership name)	
scanning, copying or storing this document.	nip meeting professional association
Part II – Acceptable ID documents (to verify membership of a pro	ofessional association)
An original current membership certificate (or equivalent) Membership details independently sourced from the relevant	

This is the end of Section F. Please submit this form together with the completed application form.

Section G. Associations

GENERAL INFORMATION Full name of Association Provide an ID number issued on incorporation (e.g. An ACN) (if any) Details of the following (or equivalent in each case): 1. Chairman Full given name(s) Address details of Chairman Residential street address (PO Box is not acceptable) Surname 2. Secretary Full given name(s) Surname Date of birth (dd/mm/yyyy) / / / Basidential street address (PO Box is not acceptable) Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) Address details of Treasurer Full given name(s) Address details of Treasurer Residential street address (PO Box is not acceptable)	GENERAL INFORMATION	
Provide an ID number issued on incorporation (e.g. An ACN) (if any) Details of the following (or equivalent in each case): 1. Chairman Full given name(s) Address details of Chairman Residential street address (PO Box is not acceptable) Sunname Suburb State Postcode Country (if not Australia) 2. Secretary Full given name(s) Address details of Secretary Residential street address (PO Box is not acceptable) Suburb Sunname Country (if not Australia) Address details of Secretary Residential street address (PO Box is not acceptable) Suburb Suburb Suburb Suburb State Postcode Country (if not Australia) 3. Treasurer Full given name(s) Address details of Treasurer Residential street address (PO Box is not acceptable)	OLIVERAL IN OKUATION	
Details of the following (or equivalent in each case): 1. Chairman Full given name(s) Surname Date of birth (dd/mm/yyyy) / / Suburb State Postcode Country (if not Australia) 2. Secretary Full given name(s) Address details of Secretary Residential street address (PO Box is not acceptable) Address details of Secretary Residential street address (PO Box is not acceptable) Address details of Secretary Residential street address (PO Box is not acceptable) Suburb Suburb Suburb Suburb Suburb State Postcode Country (if not Australia) 3. Treasurer Full given name(s) Address details of Treasurer Residential street address (PO Box is not acceptable)	Full name of Association	
Details of the following (or equivalent in each case): 1. Chairman Full given name(s) Surname Date of birth (dd/mm/yyyy) / / Full given name(s) Address details of Chairman Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) 2. Secretary Full given name(s) Address details of Secretary Residential street address (PO Box is not acceptable) Suburb Suburb Suburb Suburb State Postcode Country (if not Australia) 3. Treasurer Full given name(s) Address details of Treasurer Residential street address (PO Box is not acceptable)		
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Residential street address (PO Box is not acceptable)		Address details of Treasurer
Surname		Residential street address (PO Box is not acceptable)
	Surname	
Date of birth (dd/mm/yyyy)	Date of birth (dd/mm/yyyy)	
/ / Suburb		Suburb
State Postcode		
Country (if not Australia)		Country lif not Australia)
SECTION G2	SECTION G2	
ASSOCIATION TYPE	ASSOCIATION TYPE	
Please select ✓ ONE of the following:		
	rtease select V ONE of the following:	
Unincorporated Association – please proceed to Section G4	Incorporated Association – please proceed to Section G3	

ease select 🗸 and provide details for ONE of the following	
Principal place of administration	Registered office
reet address (PO Box is not acceptable)	Street address (PO Box is not acceptable)
uburb	Suburb
rate Postcode	State Postcode
ountry	Country
Name & residential address of the public officer (or presi	dent/secretary/treasurer if there is no public officer)
given name(s) or officer (if applicable)	
	Street address (PO Box is not acceptable)
name	
sition	Suburb
	State Postcode
	Country
ease read "Association verification procedure" below. You ECTION G4 CORPORATED ASSOCIATION	Country u do not need to complete Section G4.
ECTION G4 CORPORATED ASSOCIATION incipal place of administration	Country u do not need to complete Section G4. Individual Member Identification Procedure
ECTION G4 CORPORATED ASSOCIATION incipal place of administration	Individual Member Identification Procedure Details of the member who is signing on behalf of the Association.
COTION G4 CORPORATED ASSOCIATION ncipal place of administration	Country u do not need to complete Section G4. Individual Member Identification Procedure
COTION G4 CORPORATED ASSOCIATION ncipal place of administration	Individual Member Identification Procedure Details of the member who is signing on behalf of the Association. Surname
CORPORATED ASSOCIATION ncipal place of administration treet address (PO Box is not acceptable)	Individual Member Identification Procedure Details of the member who is signing on behalf of the Association.
CORPORATED ASSOCIATION ncipal place of administration treet address (PO Box is not acceptable)	Individual Member Identification Procedure Details of the member who is signing on behalf of the Association. Surname Full given names
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CORPORATED ASSOCIATION incipal place of administration Street address (PO Box is not acceptable)	Individual Member Identification Procedure Details of the member who is signing on behalf of the Association. Surname Full given names Date of birth (dd/mm/yyyy) / / Residential address Street address (PO Box is not acceptable)

Association verification procedure

If you are an "Incorporated Association" (as selected in Section G2 of this form), Praemium will perform the Association verification procedure. However, if we cannot access the information to complete this procedure you will need to provide us with an originally certified copy or certified extract of the Constitution or Rules of the association.

If you are an "Unincorporated Association" (as selected in Section G2 of this form), you will need to provide us with an originally certified copy or certified extract of the Constitution or Rules of the association for Praemium to perform the Association verification procedure.

This is the end of Section G. Please submit this form together with the completed application form.

Section H. Registered Co-operative

ENERAL INFORMATION ull name of registered co-operative	
utt name of registered co-operative	
rovide ID number issued by relevant registration body (i	if anyl
etails of the following (or equivalent in each case):	
. Chairman	Address details of Chairman
ull given name(s)	Address details of Chairman
	Residential street address (PO Box is not acceptable)
urname	
Data of Linkh (dd/mm//mm)	
Oate of birth (dd/mm/yyyy)	Cuburb
1 1	Suburb
	State Postcode
	Country (if not Australia)
Secretary	Country (if not Australia)
	Address details of Secretary
ull given name(s)	
ull given name(s)	Address details of Secretary
ull given name(s)	Address details of Secretary
2. Secretary Full given name(s) Surname Date of birth (dd/mm/yyyy)	Address details of Secretary
Full given name(s) Surname	Address details of Secretary Residential street address (PO Box is not acceptable)
ull given name(s) urname	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode
Full given name(s) Surname	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb
Surname Date of birth (dd/mm/yyyy) / /	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode
ull given name(s)	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode
urname late of birth (dd/mm/yyyy) / / / Treasurer	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia)
Juli given name(s) Jurname Jate of birth (dd/mm/yyyy) / / / S. Treasurer	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) Address details of Treasurer
Juli given name(s) Jurname Jate of birth (dd/mm/yyyy) / / J. Treasurer Juli given name(s)	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) Address details of Treasurer
urname ate of birth (dd/mm/yyyy) / / . Treasurer ull given name(s) urname	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) Address details of Treasurer
urname ate of birth (dd/mm/yyyy) / / . Treasurer ull given name(s) urname	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) Address details of Treasurer
Juli given name(s) Jurname Jate of birth (dd/mm/yyyy) / / J. Treasurer Juli given name(s) Jurname Jurname Jurname	Address details of Secretary Residential street address (PO Box is not acceptable) Suburb State Postcode Country (if not Australia) Address details of Treasurer Residential street address (PO Box is not acceptable)

Principal place of operations	Registered office
Street address (PO Box is not acceptable)	Street address (PO Box is not acceptable)
Suburb	Suburb
State Postcode	State Postcode
Country (if not Australia)	Country (if not Australia)
	esident, secretary or treasurer if there is no public officer) Street address (PO Box is not acceptable)
Name & Residential address of the public officer (or pr	esident, secretary or treasurer if there is no public officer)
Name & Residential address of the public officer (or profull given name(s) or officer (if applicable)	esident, secretary or treasurer if there is no public officer)
Name & Residential address of the public officer (or profull given name(s) or officer (if applicable) Surname	esident, secretary or treasurer if there is no public officer) Street address (PO Box is not acceptable)

Registered Co-operative identification procedure

Praemium will perform the Registered Co-operative identification procedure. However, if we cannot access the information to complete this procedure you will need to provide us with an originally certified copy or certified extract of the register maintained by the co-operative.

This is the end of Section H. Please submit this form together with the completed application form.