







Client Services contact details

Phone: 1300 997 774 | International: +(61) 3 9616 8687

Send your form by email: australianunitywealth_transactions@unitregistry.com.au

Email enquiries: australianunitywealth@unitregistry.com.au

Application | SMSF

WHO SHOULD COMPLETE THIS FORM?

This application form is for investments made by trustees of Self Managed Superannuation Funds (SMSF).

HOW TO COMPLETE THIS FORM

Step 1 Before submitting this form, please read the Product Disclosure Statement (PDS) available on our website www.australianunity.com.au/wealth or if you are unable to access the link or print the document, contact us on 1300 997 774. Units in a fund will only be issued following acceptance of an application form issued with the relevant PDS, with all required documents attached.

Online applications: Please complete online and then print to sign using a black pen.

Manual applications: Please print, use black pen and write in BLOCK letters. If you make an error do not use correction fluid, instead, cross out your error and initial your changes.

Note: Please ensure all fields are completed including those in sections A, B and C.

Step 2 Tell us your foreign tax status

Please complete the Global Tax Reporting (FATCA/CRS) information in section 10.

Step 3 Sign and send your documents to the below address.

Please ensure you sign section 12 of the form in accordance with the instructions provided.

You can return your forms by post to:

Australian Unity GPO Box 804 Melbourne VIC 3001

Scan and email to: australianunitywealth_transactions@unitregistry.com.au

Step 4 Make your payment

Please refer to **section 4** and **5** of the application form and follow the instructions on how to pay the application amount. Your application cannot be processed until all relevant identification documents and cleared funds are received.

IMPORTANT INFORMATION

- Please ensure all fields are completed. If you do not complete all relevant sections your application may be rejected and returned to you for completion, resulting in a delay in processing your application.
- If you have any questions as you complete this form, please refer to the FAQs of this form, or contact us on 1300 997 774.

SECTION A: DDO Obligations

The following questions may assist Australian Unity in meeting its regulatory obligations by determining whether this financial product is being offered to the stated target market.

The below only needs to be answered where you are a direct [retail] investor (i.e. does not apply to indirect or intermediated investments such as those made by platforms, custodians, etc).

Was this investment made based on personal advice received from your financial adviser?
Yes - please ensure that details of your financial adviser are completed in section 8
No - please complete the questions below:
Please read and answer the following questions carefully: It is important for you to consider if the fund you are applying to invest in is in line with your needs and objectives for the portion of your investment portfolio that you intend to invest in this fund. In other words, the questions below should be answered having regard to what you are seeking from this particular investment - not what you may be seeking more generally from your overall investment portfolio as a whole.
All financial products provide different features, objectives, risks and return profiles.
You can understand more about the specific objectives and outcomes that the fund seeks to accomplish and to determine whether the fund is appropriate for your needs by consulting the fund's PDS and <u>Target Market Determination</u> .
The following questions assist the issuer in meeting its regulatory obligations by enabling it to assess whether the selected fund is being offered to the stated target market. We reserve the right to refuse your application.
A. What is your primary investment objective in relation to this investment? (select only one option)
Note : To confirm if you are investing into a fund that is aligned with your investment objectives, please consult the "Consumer's investment objective" section of the Fund's Target Market Determination.
You are seeking an investment which provides Capital Growth Capital Growth, also known as capital appreciation or capital gain, refers to an increase in the value of an asset over time. Capital Growth is not guaranteed, and the value of an investment can also decrease, resulting in capital losses. You should consider the amount of risk you are willing to accept to achieve a capital growth, (or loss) outcome. If you are primarily seeking capital growth with some income, please select Capital Growth for Question A, and Yes for Question B.
You are seeking an investment which provides Capital Preservation A Capital Preservation strategy is a strategy employed by certain types of investment funds with the primary objective of protecting the capital invested. Generally, funds designed to provide Capital Preservation have a lower risk profile and are less volatile than growth investments. You should consider if you are willing to accept lower returns (growth or income) as a result of choosing a fund with a lower risk profile.
You are seeking an investment which provides Income Distribution Income Distribution refers to the income generated from the assets within a fund that is regularly paid out or distributed to investors periodically. The level of income generated will typically change each period and there is no guarantee of income being available each period.

B. Are you seeking a source of supplemental income (which may not be regular or recurrent) in addition to the above investment objective? (selct only one option)	
Note: If your primary objective is Capital Growth or Capital Preservation, but you are also seeking the potential for income supplemental to those a select 'Yes'. If Income Distribution is your primary investment objective, please select Income Distribution in Question A, and 'No' for Question B.	bjectives,
Yes	
No No	
C. What is your investment timeframe in relation to this investment? (select only one option)	
Note: To ensure you are investing into an appropriate fund that is aligned with your investment timeframe, please consult the "Consumer's investre timeframe" section of the Fund's Target Market Determination.	nent
Equal to 7 years or more (i.e. Long term)	
Equal to 5 years but less than 7 years (i.e. Medium to long term)	
More than 2 years but less than 5 years (i.e. Medium term)	
Up to and including 2 years (i.e. Short term)	
D. Under normal circumstances, within what period do you expect to be able to access your funds for this investment? (select onl option)	y one
Net Net II for all city and the control of the city and	
Note : Not all funds will provide you with access to your capital in line with your expectations. To ensure you are investing into a fund with appropriate withdrawal rights for your needs, please consult the " Consumer's need to access capital " section of the Fund's <u>Target Market Determination</u> .	te
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withdrawal rights for your needs, please consult the "Consumer's need to access capital" section of the Fund's Target Market Determination.	ite
withdrawal rights for your needs, please consult the "Consumer's need to access capital" section of the Fund's Target Market Determination. At issuer's discretion	
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withdrawal rights for your needs, please consult the "Consumer's need to access capital" section of the Fund's Target Market Determination. At issuer's discretion Within ten years of the request Within five years of the request Within one year of the request Within three months of the request	
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withdrawal rights for your needs, please consult the "Consumer's need to access capital" section of the Fund's Target Market Determination. At issuer's discretion Within ten years of the request Within five years of the request Within one year of the request Within one month of the request Within one month of the request Within one week of the request Within one week of the request Note: The fund you are investing into is only suitable for a set of consumers with a specific risk and return profile. To ensure you are investing into in line with your risk and return profile, please consult the "Consumer's Risk (ability to bear loss) and Return profile" section of the Fund's Target M.	a fund

I am seeking a fund with a low risk and return profile: You are looking for an investment that is low risk in nature (e.g. you have the ability to tolerate up to one negative return over a 20-year period and you are comfortable with a low target return from this investment. Funds designed to provide low risk and return typically provide capital preservation and invest in cash or cash like investments).	
I am seeking a fund with a medium risk and return profile: You are looking for an investment that is moderate or medium risk in nature (e.g. you have the ability to tolerate up to four negative returns over a 20-year period and you are comfortable with a moderate target return from this investment. Funds designed to provide a medium risk and return are typically invested in defensive assets, such as fixed income products).	
I am seeking a fund with a high risk and return profile: You are looking for an investment that is higher risk in nature (e.g. you have the ability to tolerate up to six negative returns over a 20-year period in order to achieve a higher target return from this investment. Funds with a high risk and return are typically invested in growth assets which include shares and property investments).	
I am seeking a fund with a very high risk and return profile: You are looking for an investment that is very high risk in nature (e.g. you have the ability to tolerate six or more negative returns over a 20-year period as you are seeking to maximise returns and you can accept higher potential losses. Products with Very High risk and return are typically higher conviction portfolio such as concentrated share funds, hedge funds and other growth alternative assets).	
I am seeking a fund with an extremely high risk and return: You are looking for an investment that is extremely high risk in nature (e.g. you can accept significant volatility and losses as you are seeking to obtain accelerated returns (potentially in a short timeframe). Products with an extremely high risk and return proile are typically speculative investments in niche asset classes such as crypto assets).	
F. What percentage of your total investable assets are you directing into this fund (i.e. the total assets you have available for investmexcluding your residential home)? (select only one option)	nent,
Note: The fund you are investing into is only suitable for a certain proportion of a consumer's total portfolio. To ensure the allocation in relation to your investable assets is appropriate, please consult the "Consumer's intended product use" section of the Fund's <u>Target Market Determination</u> .	r total
If you intend to direct a higher percentage of your investable assets in the fund than specified in the <u>Target Market Determination</u> , we recommend the seek professional financial advice prior to applying to invest in the fund.	ıt you
Satellite allocation (up to 10%)	
Minor allocation (up to 25%)	
Core component (up tp 50%)	
Major allocation (up to 75%)	
Solution/Standalone (up to 100%)	
G. Where did you obtain your application form? (select only one option)	
Fund Manager Website	
Financial Adviser	
Referred by a friend/colleague	
Advertisement	
Other	

Section B: Investor details	
What is the full legal name of the entity that will hold title to the units?	
Full name of account designation	
If you are an existing investor, please provide your account number	
I/We confirm there are no changes to our identification documer	nts previously provided and that these remain current and valid.
I/We confirm there are no changes to the information in our prev	rious application provided and that it remains current and valid.
Section C: Are you investing using funds borrowed under a margin la	oan?
No - go to section 1 Yes - please complete the de	etails below
Name of margin lender	Name of borrower
Borrower's TFN	Loan number
If the person who will hold legal title to the units will be the borrower gracomplete this form as an SMSF.	anting Power of Attorney to the margin lender or its nominee, please
1. TRUST/FUND DETAILS	
Full name of trust/superannuation fund	
Full business name (if any) of the trustee in respect of the trust/supera	innuation fund
Country of establishment	
Tax file number or exemption code	Australian Business Number (if any)
2. TRUSTEE DETAILS	
Note: A Self-managed Super Fund (SMSF) must have a minimum of twindividual or corporate. Where the trustee is corporate, all members of than four (4) trustees, please complete section 2 of another applications.	of the SMSF are directors of the corporate trustee. If there are more
How many trustees does the SMSF have?	
Type of trustee	
Individual trustee (complete section 2.1) Corporate	trustee (complete section 2.2 & 2.3)

2.1 Individual to	rustee(s) details
Individual trustee	1
Title	Given name(s) Surname
Date of birth (DD/	(MM/YYYY) / / Occupation
Residential addre	ess - (A PO Box/RMB/Locked Bag is not acceptable)
Unit	Street number Street name
Suburb	State Postcode Country
Contact details	
Home number (in	cluding country and area code) Mobile number (including country code)
Email (default ad	dress for all correspondence)
Email (derdait da	diess für dir correspondence)
Individual trustee	2
Title	Given name(s) Surname
Date of birth (DD/	MM/YYYY) / / Occupation
Residential addre	ess - (A PO Box/RMB/Locked Bag is not acceptable)
Unit	Street number Street name
Suburb	State Postcode Country
Contact details	cluding country and area code) Mobile number (including country code)
Tiome mamber (iii	Mobile number (including country code)
Email	
All corresponden	ce will be sent to the email address provided by Individual trustee 1 .
Individual trustee	
Title	Given name(s) Surname
Date of birth (DD/	(MM/YYYY) / / / Occupation

Unit	Street number	Street name	ptublej		
Offic	Street Humber	Street Hullie			
Suburb			State	Postcode	Country
Contact details					
Home number ((including country and ar	ea code)	Mobil	e number (including	g country code)
Email					
All corresponde	ence will be sent to the er	mail address provided	by Individual tru	istee 1.	
Individual trust	ee 4				
				0	
Title	Given name(s)			Surname	
Date of birth (D	D/MM/YYYY) /	/		Occupation	
-					
	lress - (A PO Box/RMB/Lo	_	ptableJ		
Unit	Street number	Street name			
Suburb			State	Postcode	Country
Contact details					
Home number ((including country and ar	ea code)	Mobil	e number (including	g country code)
Email					
All corresponde	ence will be sent to the er	mail address provided	l by Individual tru	istee 1.	
2.2 Corporat	e trustee details				
Full business no	ame as registered by ASI	С	ACN		
Nature of busin	ess				
Registered Offi	ce Address - (PO Box is n	ot acceptable)			
Unit	Street number	Street name			
Suburb			State	Postcode	Country
Guburb			Jule	Fusicode	Country

Principal pla	ce of business (if any) (PO I	Box is not acceptable)					
Unit	Street number	Street name					
Suburb			State		Postcode	Country	
	ills (for company or contac	t person)		E			
Name				Email			
Business nur	mber (include country and	area code)		Mobile no	umber (include d	country code)	
23 What t	ype of company is the corp	norate trustee?					
2.0 What t	gpe or company is the corp	sorute trustee .					
Public (com	panies whose name does N	IOT include the word P	tu or nroni	rietaru: a	enerallu listed ca	nmnaniesì	
	Parilos Wiloso Hamo accon	Thomas the word?	tg or propr	inotal g, g			
Proprietary	(companies whose name e	nds with Proprietary L	td or Pty L	td; also k	nown as private	companies)	
Please comp	lete the director details bel	low if you are an Austro	alian propi	rietary co	mpany. Do not d	complete for public comp	oanies.
Directors det							
_	rectors are there?						
Please provio	de below the full name of al o this application form.	I the directors. If there	are more	than four	directors, pleas	e complete the details o	n a separate sheet
Director 1							
Title	Given name(s)				Surname		
Director 2							
Title	Given name(s)				Surname		
Director 3							
Title	Given name(s)				Surname		
Director 4							
Title	Given name(s)				Surname		

3. INVESTMENT AND DISTRIBUTION INSTRUCTIONS

Specify your initial application amount.

The minimum investment amount is \$5,000 per fund. Indicate your distribution choice below. If you do not make an election, distributions will be reinvested.

and name APIR		Investment	Distribution option (indicate (X) one option per fund)		
runa name	APIK	amount AUD\$	Pay to my bank a/c	Reinvest	
Altius Green Bond Fund - Retail	AUS9041AU				
Altius Sustainable Bond Fund	AUS0071AU				
Altius Sustainable Short Term Income Fund - Retail	AUS1392AU				
Australian Unity A-REIT Fund	AUS0055AU				
Platypus Australian Equities Fund - Wholesale Units	AUS0030AU				
Pro-D Balanced Fund	AUSO066AU				
Pro-D Growth Fund	AUSO068AU				
Pro-D High Growth Fund	AUS0064AU				
Talaria Global Equity Fund - Currency Hedged (Managed Fund)	WFS0547AU				
Talaria Global Equity Fund (Managed Fund)	AUS0035AU				
Please indicate the source & origin of funds being invested.					
Savings					
Superannuation contributions					
Income from employment - regular and/or bonus					
Normal course of business					
Investment					
Donation/gift					
Inheritance					
Sale of assets (e.g. shares, property)					
Other					

4. PAYMENT OF A	APPLICATION AMOUNT				
Select your payme	nt method and complete the relevant section if ap	plicable. All payments must be made in AUD.			
EFT	Direct debit				
EFT	Electronic Funds Transfer				
Account name:	OFS ARF Australian Unity Funds Management Ltd Application Trust Account				
BSB:	083-001				
Account number:	765189036				
Your reference:	[please use the name of the investor and investor	number]			
Direct debit author	ity - Australian bank accounts only				
	ow. This debit will be made through the Bulk Electro	ur nominated financial institution account by completing the direct onic Clearing System (BECS) from your account held at the financial			
section, you have u		er to process your application and payment. By completing this is governing the debit arrangements between you and OneVue Fund equest Service Agreement.			
Financial institution	n name	Branch name			
Account name					
BSB number		Account number			
	o arrange, through its own financial institution, a d	or Australian Unity Funds Management Limited ABN 60 071 497 115 ebit to the nominated account as deemed payable by our administrator.			
Please print full na	me	Date (DD/MM/YYYY)			
Signature of joint a	ccount holder (if applicable)				
Please print full na	me	Date (DD/MM/YYYY)			

5. FINANCIAL INSTITUTION ACCOUNT DETAILS Australian bank account details

Additional bank docoding details	
	ected to take your distribution in cash or wish to provide these details for future ccount in the name(s) of the investor(s). We will not make any payments into third
Financial institution name	Branch name
Account name	
BSB number	Account number
Foreign bank account details	
Financial institution name	Financial institution address
Account number	Account name
ONUET/DIO	ADA/ISED (UO)
SWIFT/BIC	ABA/FED (US)
IDAN (Europa)	
IBAN (Europe)	
6. REGULAR SAVINGS PLAN	
I/We would like to establish a regular savings plan	
Monthly investment amount AUD\$	(minimum \$100 per month).
Please complete the direct debit request in section 4 (Pay	yment of application amount) above.
7. COMMUNICATION	
Automatic online account access	
	nents (account balance, investment details and account statements). We will send
you the necessary registration details by post once your	
Note : You may receive marketing material (e.g. market of you do not wish to receive these communications.	commentary, event invitations) from us, from time to time. Please indicate
Annual & semi-annual report options	
	the fund are available free on our website. If you would like to receive a copy by all and semi-annual reports only. This will not affect communication instructions
By email By post	

Marketing material	
You may receive information from us via mail, telephone, email or a services or information that may be of interest to you. By providing these methods for these purposes. Please indicate if you do not wi our group.	
8. FINANCIAL ADVISER DETAILS	
Use this section to tell us about your financial adviser. If you change you If you would like your financial adviser to receive copies of your stateme	
Adviser email address	
Operating your account	
Do you want your financial adviser to be able to operate your account?	
No	
Yes - Please complete section 9 (Authorised representative of investigation)	stor).
In general, an appointed financial adviser can do everything you can do your account. It is important to tell us promptly if you no longer wish you adviser changes – OneVue will keep accepting their instructions until yo terminated.	ur financial adviser to operate your account, or if your financial
We may suspend or terminate their appointment for any reason consider your account.	ered reasonable, and may change the terms on which they operate
You indemnify us from any loss you or we suffer as a result of the action actions if we ask.	s of your appointed financial adviser, and agree to ratify their
Notice to financial adviser: by completing this section of the application Financial Services Licence (AFSL), or are otherwise authorised to advise	
Details	
AFSL holder name	AFSL number
Adviser name	
Advisor code or Authorised representative number	ABN
Dranactus/huilding nama	
Property/building name Unit Street number Street name	
Suburb State	Postcode Country
Phone	Mobile

Performance of investor identification & verification procedures
Please indicate below whether client identification and verification procedures have been performed.
No - I have not performed the applicable customer identification procedure on this investor.
Yes - I have completed the applicable customer identification procedure on this investor.
Financial adviser declaration
Notice to financial adviser: please note that reliance on the KYC performed by the financial advisor is only acceptable if all the criteria below is met.
I hold an AFSL in my own name or have been appointed as an authorised representative by the licensee.
I am a reporting entity for AML/CTF purposes.
The issuer has reasonable grounds to believe that it is appropriate to rely on the KYC procedure I have undertaken.
I have attached the KYC documents to this form.
AFSL full legal entity name AFSL number
Please print full name
Signature
9. AUTHORISED REPRESENTATIVE OF INVESTOR
Please complete this section if you wish to appoint an individual or individuals to act on your behalf in relation to your investment in the fund. If you have appointed an entity as your authorised representative, please contact us on 1300 997 774 to obtain the relevant KYC form.
9.1 Authorised representative details
Authorised representative 1
Title Given name(s) Surname
Authorised representative's phone number
Email [
Authorised representative's signature
Additionsed representatives signature

Authorised repre	esentative 2				
Title	Given name(s)		Surname		
Authorised repre	sentative's phone number				
Email					
Authorised repre	sentative's signature				
If you wish to app application form.	point more than two authorised representatives, please co	omplete	the details on a separate sheet and attach to this		
9.2 How autho	rised representatives may act in relation to the account?				
Tick applicable					
Each authorised	d representative listed above may provide instructions in r other	elation	to the investment individually without the		
All authorised representatives must act jointly to provide instructions in relation to the investment					
Other arrangem	nent – please provide details				
9.3 Verification	n procedure for authorised representatives who are indivi	duals			
	rised representative, please provide verification document a authority to act on behalf of the investor. Please tick the				
Verification doc	euments - mandatory				
A certified copy of an Australian Driver's Licence or Australian Passport					
Authorised repr	resentative's authority - one of the following (not required	for a Fi	nancial Adviser listed in Section 8)		
Certified copy of the authorising document (e.g. POA); or					
A certified copy of a guardianship order; or					
Other arrangem	nent – please provide details				
I confirm the	at the document authorising each authorised representat	ive is st	ill valid and has not been revoked.		
Note: If any verification documents provided are written in a language other than English, they must be accompanied by an English translation prepared by an accredited translator.					

10. GLOBAL TAX REPORTING REQUIREMENTS (FATCA/CRS)

Why you need to complete this section?

The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and a number of other foreign Governments have an agreement which requires us to obtain certain information from investors, including taxation information. You may be liable to a penalty if you provide information that is false or misleading that is material. We may decide not to open an account without first receiving the required information. For more information, visit www.ato.gov.au.

If you are unsure of any of the answers, please contact a legal or accounting professional.

10.1 Regulated Superannuation Funds Are you a regulated superannuation fund? I am the trustee of a regulated superannuation fund (this includes a self-managed superannuation fund)

HELP

Regulated superannuation fund means self-managed superannuation funds, APRA regulated superannuation funds, Australian Government or semi-government superannuation funds and pooled super trusts.

11. DECLARATIONS & ACKNOWLEDGMENTS

Please read the declarations below before signing this form. The required signature(s) are detailed at the bottom of this form. When you apply to invest, you (the applicant) are telling us:

- to the best of your knowledge, all details in this application (including all related documents provided) are true, correct and complete
- you have received, read and understood the current PDS. You agree to be bound by the constitution of the fund, the PDS as supplemented, replaced or re-issued from time to time
- you are not bankrupt or a minor, and are authorised to sign this form
- you have received and accepted this offer in Australia
- you have read and understood the information relating to privacy in the PDS
- I consent to the issuer disclosing my personal information to any issuer's service providers, in relation to any identification and verification that the issuer is required to undertake on me, as required under the AML/CTF Act. This shall include any information:
 - o required by any third party document verification service provider, and/or
 - o provided to any third party document verification service provider.

By applying to invest you also acknowledge that:

- monies deposited are not associated with crime, money laundering and/or financing terrorism. We may decide to delay or refuse any
 request or transaction, including by suspending the issue or redemption of units. If we are concerned that the request or transaction
 may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/
 CRS obligations, we will incur no liability to you if we do so
- we may take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS
 obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether
 in Australia or outside Australia, or to any relevant Australian or foreign regulator, and
- we collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in Australian Unity's privacy policy available online at www.australianunity.com.au/privacy-policy or by contacting us.

Important information

- nothing in this form is advice and 'help' is general guidance only. Seek professional advise to be sure of your answers
- it is a condition of investing that you keep your details (including tax detail) with us, up to date. We recommend that you review this tax information form at the end of the financial year and update your details if required. You must contact us when you learn new things about the matters in this form. Failing to update us can have tax and other consequences. You can update us by requesting and completing this form and emailing, faxing or posting it to our Administrator.

By completing and signing this form:

- you represent having read and understood this form
- you represent this form is complete and accurate
- if you have applied for but not received your TIN or GIIN, you undertake to inform us within 30 days of receiving it
- you undertake that if information in this form changes, you will tell us within 30 days
- you declare that to the best of your knowledge and belief the information provided in the Global Tax Reporting section is true and correct
- you agree to notify Australian Unity of any changes to your tax residency or that of any beneficial owners or controlling person.

12. SIGNATURE(S)

For individual trustees, all trustees to sign. For Australian corporate trustee, the signature(s) of either a sole director, or two directors, or one director and the company secretary.

Signature 1	Signature 2
Signature	Signature
Date (DD/MM/YY)	Date (DD/MM/YY)
Full name	Full name
Capacity	Capacity
Individual trustee 1	Individual trustee 2
Director	Director
Company Secretary	Company Secretary
Authorised Representative	Authorised Representative
Signature 3	Signature 4
Signature	Signature
Date (DD/MM/YY) / / / / Full name	Date (DD/MM/YY) / / / / Full name
Capacity	Capacity
Individual trustee 3	Individual trustee 4
Director	Director
Company Secretary	Company Secretary
Authorised Representative	Authorised Representative

FAQs

Translating documents by an accredited translator

In Australia an accredited translator means a professional translator accredited by the National Accreditation Authority for Translators and Interpreters at or above professional level.

• NAATI (https://www.naati.com.au/)

In an overseas country, an accredited translator is a professional translator accredited by a NAATI equivalent authority. For these, escalate to the AML Compliance Officer for assistance.

Getting your copies certified

Any document(s) requiring to be certified for verification purposes must be certified by an eligible person to be a true copy of the original document. Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.

Example of certification

I certify that this is a true and correct copy of the original document

Signature of Certifier Name of Certifier

Capacity of certifier - e.g. Justice of the Peace

Date of certification (DD/MM/YYYY)

List of occupations that can certify (from the Statutory Declaration Regulations 2018)

- Architect
- Chiropractor
- Dentist
- Financial adviser or financial planner
- Legal practitioner
- Medical practitioner
- Midwife
- Migration authorised representative registered under Division 3 of Part 3 of the Migration Act 1958
- Nurse
- Occupational therapist
- Optometrist
- Patent attorney
- Pharmacist
- Physiotherapist
- Psychologist
- Trade marks attorney
- Veterinary surgeon.

List of persons who can certify

- a person who is enrolled on the roll of the Supreme Court of a State or Territory or the High Court of Australia, as a legal practitioner (however described)
- a judge of a court
- a magistrate
- a chief executive officer of a Commonwealth court
- a registrar or deputy registrar of a court
- a Justice of the Peace
- a notary public (for the purposes of the Statutory Declaration Regulations 2018)
- a police officer
- an authorised representative of the Australian Postal Corporation who is in charge of an office supplying
 postal services to the public
- a 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
- an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)
- an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 2018)
- a finance company officer with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 2018)
- an officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees
- a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.