



## UNIT TRUST – ORDER FORM

**NAME OF TRUST AND STATE OF OPERATION:**

..... Stamp Duty State/Territory: .....

**SETTLOR:** Name: .....

Address: .....

**SETTLED SUM:** Amount: \$.....

**TRUSTEE:** Name: ..... and .....(if jointly)

Address: .....

**IF CORPORATE TRUSTEE:** Name.....ACN:.....

Directors Name(s) if Corporate Trustee: .....

**UNIT HOLDERS:**

Name	Address	Class of Units	No. of Units

To ABNAustralia.com.au: You are appointed to act as our agent to procure a Trust Deed and ancillary legal documentation from a solicitor, the particulars for such trust deed and legal documents being set out hereinbefore. In consideration for you acting as our agent, payment of solicitors costs, attending to compilation of materials in a register and delivery of same we shall pay you such amounts as agreed.

Disclaimer – We do not provide legal, accounting, financial or stamp duty advice and therefore take no responsibility for your taxation, legal or other liabilities which may arise from the work we perform on your instructions. We urge you to first obtain legal and accounting advice in relation to your affairs and in particular this transaction.

**APPLICANT DETAILS (FIRM):**.....

CONTACT PERSON: .....PH:.....FAX:.....

FULL ADDRESS:.....

EMAIL: ..... SIGNATURE:..... DATE: ..../.../.....

<b>PAYMENT REQUIRED WITH ORDER</b>	<b>Amount \$.....</b>
<input type="checkbox"/> Direct Deposit / EFT	
Bank: ANZ Banking Group	BSB: 015-056 Account: 225324305 Ref: Please use name of Trust
<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
Card Number:.....	Expiry Date:..... CCV .....
Name of Cardholder:.....	Signature.....