

Section G: Authority to Operate Corporate Account

Please complete when a person other than the Account Holder is authorised to operate the account.

- I/We wish to appoint the person detailed below as an Authorised Person.
- I/We wish to cancel the appointment of the Authorised Person listed below.
- NOTE: Withdrawal is not effective until received and processed. A withdrawal request does not have to be signed by the Authorised Person.

Account Name: _____

Authorised Person - Personal Details

Title: _____ Full Name (given name(s) and surname): _____

Single Married De Facto Divorced Widow(er)

Date of Birth: _____

/ /

Identification Document Type: _____

Identification Document Number: _____

*Please provide copy of identification document

Australian Resident: YES NO

Tax File Number: _____

Occupation: _____ Position / Title: _____

Employer: _____

Residential address:

Same as Section A: YES NO If NO please complete details below

Suburb: _____ State: _____ Postcode: _____ Country (If not Australia): _____

Contact / Telephone Details:

Home: _____ Business: _____

Mobile: _____ Facsimile: _____

Email: _____

Acknowledgment and Signature

Authorised Person: By signing below the Authorised Person acknowledges that they have:

- been given authority by the Account Holder(s) to operate the Account and will operate the Account in accordance with the Account Holder's investment objectives and personal circumstances; and
- read and understood the Financial Services Guide and the Trading Terms and, if relevant, Sponsorship Terms of the Agreement.

Signature of Authorised Person

Date

Witness (not an Officer)

Account Holder: By signing below the authorised officer(s) of the Account acknowledge on behalf of the body corporate / entity that the person nominated as an **Authorised Person** as above has authority to operate the Account on its behalf. Such authority remains valid until withdrawn in writing and signed. By signing, the authorised officers verify the signature of the **Authorised Person**. Such authority remains valid until withdrawn in writing and signed.

Signature of Officer

Signature of Officer

Name (Please print)

Name (Please print)

Title of Officer

Title of Officer

Date

Date