

DISCRETIONARY TRUST – ORDER FORM

NAME OF TRUST AND STATE OF OPERATION:

.....Stamp Duty State/Territory:

SETTLOR: (must not be a director of the Trustee Company – should be independent of Trustee and all beneficiaries)

Name:

Address:

SETTLED SUM: Gift Of: \$ Never to be refunded

TRUSTEE: Name: and (if jointly)

Address:

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

Directors Name(s) if Corporate Trustee:

PRIMARY BENEFICIARIES:

Name:ACN:

Address:

and Name:ACN:

Address:

MEMBERS OF THE CLASS OF ELIGIBLE BENEFICIARIES: (persons or entities unrelated to the above – please include Trustee if Trustee is to be a beneficiary. Does not include excluded beneficiaries)

.....

APPOINTOR:and.....(if jointly)

Upon appointor's death:and.....(if jointly)

To DGA: 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:/.../.....

PAYMENT REQUIRED WITH ORDER

Amount \$.....

Direct Deposit / EFT

Bank/Branch: ANZ Grenfell St Adelaide BSB: 015-010 Account: 9002 61003 Date Deposited/Transferred/.../.....

MasterCard

Visa

Card Number:.....Expiry Date:.....

Name of Cardholder:.....Signature.....