

**THE COMPANY PEOPLE**

<b>THE COMPANY PEOPLE PTY LTD</b>	<b>Level 1, 5 Castles Drive TORQUAY Victoria 3228</b>
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<b>FIRM/PERSON PLACING ORDER</b>	
<b>Firm Name:</b>	<b>Contact Name:</b>
<b>Address:</b>	
<b>Phone:</b>	<b>Fax:</b>

**Desired Name of Trust:** .....

**State/Territory of jurisdiction:** .....

**Is the proposed lender the National Australia Bank? : Yes / No**

**Asset Acquisition Trustee Details (For the Trust you are ordering)**

**Name of Trustee:** ..... ( Cannot be the same as the Super Fund Trustee)

**If Company - A.C.N. No.**.....

**Registered Office or Residential Address** .....

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**Superannuation Fund Trustee Details (for the existing Super Fund)**

**Name of Super Fund** .....

**Name of Super Fund Trustee:** .....

**If Company - A.C.N. No.** .....

**Registered Office or Residential Address** .....

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**PRICE \$363.00 (Inc. GST)**

**CONFIRMATION OF ORDER AND PAYMENT DETAILS**

I, (print name ) ..... confirm that the persons/corporations named above have consented to act in the capacity shown. Payment for the company and/or other services will be as indicated below:

- Cheque enclosed \$
- Please debit my account - I understand that my firm/company will be liable to you for payment. I confirm that I am authorised to place this order on behalf of my firm/company.
- Please charge \$ ..... for this purchase to the following credit card account:  
 Mastercard  Visa

Card Number    |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|    Expiry Date...../.....

Cardholder name.....

Address.....

**Authorised Signatory\*** .....

\* If payment is by credit card - signatory must be the cardholder. If by debit on trading account signatory to be authorised to sign on behalf of firm /company (available to approved clients only).