

How to complete the AML/CTF Investor Identification Information Form

The Australian government has introduced legislation called the 'Anti-Money Laundering and Counter Terrorism Financing Act 2006' which is designed to combat money laundering and terrorism financing.

The introduction of this legislation means that investors must provide additional identification details when they request a 'designated service'. You may also be asked to provide supporting identity documentation.

What is a designated service, and are you requesting one of them?

- 1. Are you acquiring (e.g. buying or transferring) a NSW Treasury Bond?
- 2. Are you applying for a NSW Treasury Bond by completing an application form?

If the answer is yes to either of these questions, you are requesting a designated service and therefore must complete an 'Investor Identification Information Form' and provide the identity documents specified on the form.

Which type of investor are you and which section of the form should you complete?

The amount of information you need to provide depends upon your Investor Type. You need only complete the section(s) of the form that relate to your particular Investor Type and circumstances, as follows:

Investor Type	Form
Individual/Including joint Individuals	Individual (Complete one form per joint Individual holder)
Company (foreign or domestic)	Company
Trust	Trust
Financial Planners, Brokers or other AFSL Holders	AFS Licensee Information Form

What do you need to do?

- 1. Complete the appropriate form or forms for your Investor Type by typing it, or handwriting in blue or black pen ink. Do not use correction fluid/tape or pencil. Please initial all corrections. Complete one form for each Investor.
- 2. **Include originally certified copies** of identity documents as specified on each form. A list of people who can certify documents is on the other side of this page. **Do not** send original documents as they may get lost. Certified copies of documents will not be returned to you.
- 3. Each Agent, Power of Attorney, Parent or Guardian acting on behalf of an Individual Investor must identity themselves and provide supporting documentation.
- 4. If you are requesting a designated service via a financial planner or broker, provide your identity documents to them for verification
- 5. Attach all of the relevant documents to the front of the transfer or application form and mail to:

Link Market Services Limited
Registry Operations – AML/CTF Processing
Locked Bag A14
SYDNEY SOUTH NSW 1235
AUSTRALIA

Please note: If you are lodging this form with an 'Application for NSW Treasury Bonds' please send this form with your application to the address specified on the application form.

AFS Licensees:

6. Verify the Investors identity and then complete the AFS Licensee form. Attach it to the Investor Identification Information Form.

Who can certify identity documents for you?

The following individuals are authorised to certify identity documents. This list may be different to other lists you are accustomed to using. One of the people on this list should certify your identity documents or we may have to reject your forms.

- 1) A legal practitioner enrolled on the roll of the Supreme Court of an Australian State or Territory, or the High Court of Australia;
- 2) A judge of a court;
- 3) A magistrate;
- A chief executive officer of a Commonwealth court;
- A registrar or deputy registrar of a court;
- 6) A Justice of the Peace (a.k.a. JP);
- 7) A notary public (for the purposes of Statutory Declaration Regulations 1993);
- A police officer;
- An agent of Australia Post, who is in charge of an office supplying postal services to the public;
- 10) A permanent employee of Australia Post with 2 or more years continuous service who is employed in an office supplying postal services to the public;
- 11) An Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955);
- 12) An officer with 2 or more years continuous service with one or more financial institutions (for the purposes of Statutory Declaration Regulations 1993) e.g. bank manager;
- 13) An officer with 2 or more years continuous service with one or more finance companies (for the purposes of Statutory Declaration Regulations 1993) e.g. finance company manager;
- 14) An officer or a representative with 2 or more years continuous service with one or more holders of an Australian financial services licence e.g. financial planner;
- 15) A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years continuous membership e.g. Accountant or CPA.

Privacy Statement:

Link Market Services Limited advises that the Anti-Money Laundering & Counter Terrorism Financing Act 2006 (AML/CTF) requires information about you (including but not restricted to, your name, street address, date of birth or country of origin) be collected and verified before a designated service is provided to you. The minimum information collected complies with the rules of the AML/CTF Act. NSW Treasury Corporation or Link may request additional information from you before providing you with the requested designated service.

Please note: your personal information may be disclosed to the AML/CTF regulator, AUSTRAC, or a law enforcement agency.

Section 1 - to be completed by all Investors.





INDIVIDUAL

Investor Identification Information Form

Service Requested by the investor	
Please tick one	Issuer name
Transfer registration	NSW TREASURY CORPORATION
Application for an issue of NSW Treasury Bonds	Security code/Description
New Housely Bonds	NSW TREASURY BONDS
Section 1	Investor identification details
Surname	Date of birth
	dd / mm / yyyy
First name(s)	Middle name(s)
Residential street address (Do not use a PO Bo	ox or C/- Address) Suburb/Town/City
Line 1	
	State/Territory/County/Region
Line 2	
	Post/Zip code
Line 3	
	Country (if not Australia)
Line 4	
Country of birth	
Country(s) of residency 1.	2.
Country(s) of citizenship 1.	2.
Primary Occupation or	
Business Activity	
Section 2 Investors Ag	ent or Power of Attorney or Person Acting on behalf of a Minor
Full name of person acting on behalf of the Indi	vidual
Residential address (Do not use a PO Box or C	/- Address) Phone number
Address line 1	Country code / area code / number
	Date appointed as agent or POA
Address line 2	dd / mm / yyyy
Proof of Identity and Authorisation	n to Act on the Investors Behalf
I have attached a certified copy of my dicontains my signature; and	river's licence, passport or other photo Id which confirms my details above and Agent
I have attached a certified copy of my a	uthorisation to Act on behalf of the Investor. (Tick from list over page)
In the case of a minor, I have attached a	a certified copy of the minors birth certificate or extract of birth.
Signature	Date
	dd / mm / yyyy

Investors signature

Tick ✓	
	Authority to act as Investors Agent
	Power of Attorney
	Minor(s) Statement and Indemnity
	Other, please specify:
Section	on 3 Identification documents – to be completed by or for the Investor
original doc	plete either Option 1 or Option 2 and attach the applicable document(s). Please DO NOT attach original documents. Send only certified copies of uments. Documents will not be returned. Holders of an AFSL providing a service to the Investor must complete the AFS Licensee form at the document which certifies they have verified the identity of the Investor.
Option 1	– Australian citizens – Please attach at least 1 document; or Foreign citizens – Please attach at least 2 documents
Tick √ 1	Primary photographic identity document
	Driver's Licence
	Australian Passport (current or expired in the last 2 years)
	International Travel Document – foreign passport
	Proof of Age Card
	National Identity Card
	n 2 – Australian citizens – Please attach at least 1 primary non-photographic document <u>and</u> 1 secondary non-photographic document; n citizens – Please attach at least 2 primary non-photographic documents <u>and</u> 1 secondary non-photographic document
Tick √ 1	Primary non-photographic identity document; AND
	Australian Birth Certificate or Extract of Birth
	Australian Citizenship Certificate
	Foreign Citizenship Certificate
	Foreign Birth Certificate
	A Centrelink Pension card or Centrelink Healthcare card
Tick √ 1	Secondary non-photographic identity document
	A financial benefit notice issued by the Commonwealth, State or Territory within the last 12 months
	An income tax assessment notice issued within the last 12 months
_	A local government notice (e.g. council rates) or utilities notice (e.g. power, gas or phone bill) issued within the last 3 months
	In relation to a minor (under 18 years of age) a notice issued by a school principal within the last 3 months
	All foreign language documents must be accompanied by an English translation prepared by an accredited translator

Date

dd

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Authorisation - In relation to the person authorised to act for the Individual

Please **DO NOT** attach original documents. Send only certified copies of original documents. Documents will not be returned.





COMPANY

Investor Identification Information Form

Service requested by the Investo	r	Issuer details
Please tick one	Issuer name	
Transfer registration	N S W T F	REASURY CORPORATION
Application for an issue of	Security code/Description	n
NSW Treasury Bonds	N'SW T'	REASURY BONDS
Section 1	Inves	tor identification details
Company name		
Registered office street address (Do not use a	PO Roy or C/- Address)	Suburb/Town/City
Line 1	1 O Box of O/- Address)	Subului Towniotty
Line i		
		State/Territory/County/Region
Line 2		
		Post/Zip code
Line 3		
		Country (if not Australia)
Line 4		
		Country of incorporation/Origin
Principal place of business street address (Do	not use a PO Box or C/- Add	lress) Suburb/Town/City
Line 1		
		State/Territory/County/Region
Line 2		
		Post/Zip code
Line 3		
		Country (if not Australia)
Line 4		
	Company type	and registration details
Please tick from each column		ACN or ARBN
Domestic company Pu	blic company	ASIC registered ->
	. ,	and/or Foreign registration number
	oprietary or Private	Foreign registered ->
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Section 4		Id	entifi	ıcatı	on d	ocu	men	ts –	to b	e c	om	plet	ed	by '	tne	Inv	/es	tor				
Please attach at leacopies of original do to the end of this do	cuments. Docu	ments will	not be	returne	ed. Hol	ders o	f an AF	SL pr	ovidin													
Tick ✓ Identit	/ document																					
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TRUST

Investor Identification Information Form

Service requested by the cust	omer	Issuer details
Please tick one	Issuer name	
Transfer registration	N S W T	REASURY CORPORATION
Application for an issue of	Security code/Descrip	otion
☐ NSW Treasury Bonds	N S W T	REASURY BONDS
Section 1	Inve	estor identification details
ust name		
isiness name (if any) of the Trustee/Res	sponsible entity	
	 	
ountry of Establishment/Origin		
Section 2	Tri	ust identification details
Also complete this part of sec		
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pe of Trust (tick one)	to and MIO	Charitable Treet
Unit Trust Regis	stered MIS	Family Trust Charitable Trust
Property Trust Unreg	gistered MIS	Government Superannuation Fund
Corporate Unit Trust Autho	orised Trustee Corporation	Other -> Specify
Public Trading Trust Mana	and Investment Trust	
	ged Investment Trust	and handisiam.
Full name of the trust benefici		SS OF DEFICIARY
ach beneficiary's full name OR each me		
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Section	า 3	Trustee ident	tification details	
Trustee 1		Trustee type (tick one)	Individual	Company
full name of	Trustee			
· ' '	· · · · ·			
Trustee addre	ess (Do not use a PO E	Box or C/- Address)		
Address line	e 1			
Address line	e 2			
Trustee 2		Trustee type (tick one)	Individual	Company
Full name of	Trustee			
Trustee addre	ess (Do not use a PO E	Box or C/- Address)		
Address line	- i			
	1 1 1 1			1 1 1 1 1
Address line	e 2 			
Trustee 3		Trustee type (tick one)	Individual	Company
full name of	Trustee			
1 1 1				
rustee addre	ess (Do not use a PO E	Box or C/- Address)		
Address line	e 1			
Address line	92			
Section	n 4	Identification procedu	ure for all of the Trustees	s
Number of Trustees	Trustee identity pr	ocedure		
		Please complete the applicable sections of the ident ments so that your identity as a trustee can be verifi		ember to attach certified copie
		Please complete the applicable sections of the icon documents so that your identity as a trustee conditional sections.		y. Remember to attach certifi
	Please attach the co	ompleted trustee identity information form ar	nd identity documents to the back o	of this document.
		•	·	
Section	5 Ide	entification documents – to be	completed by the Trust	ee customer
Please attach		n document which verifies the identity of the trus		
Tick √ 1	A certified copy of the			
	+ .,	to the trust by ASIC or other regulator		
	Other, please specif			
	1	documents must be accompanied by an Eng	ulish translation prepared by an acc	credited translator
	ioroigii idiigudyc	accompanied by an Eng	mon translation properties by an act	
Trustee Signa	ature			
Trustee Signa	aturo		Date	



AFS Licensee Information Form

Investors full name		
Investor type:		
Individual	Trust	
Company	Individual – minor (under 18 years)	
Company	marvidua minor (under 10 years)	
Record of Investor ide	entification procedure – To be com	pleted by AFS licensee
Identity details	Primary document – Individuals and non-individuals (Do not attach original documents)	Secondary document – Individuals (Originals will not be returned)
Identity verified from	Original Certified Copy	Original Certified Copy
The identity document is	Attached Not Attached	Attached Not Attached
Document details	Primary document	Secondary document
Document issuer		
Issue date	dd / mm / yyyy	dd / mm / yyyy
Expiry date	dd / mm / yyyy	dd / mm / yyyy
Document number		
Accredited English translation	Original Attached Sighted	Original Attached Sighted
AFS licensee de	etails – Financial Planner, Financia	Il Advisor, Broker
	tives, who are arranging a designated service for the	
	cation information form verifying that they have confin	·
Full name of AFS representative		AFS licensee type
		Planner Advisor Broker
AFS licensee name		AFS license number
Licensee address		Phone number
Address line 1		Country code / area code / number
		7
Address line 2		
I confirm that I have sighted original or certified	d copies of the Investors identity documents; and (who	ere applicable).
I confirm that I have sighted original or certified	d copies of the Investors Agent or Power of Attorney,	Parent or Guardian identity documents.
AFS licensee signature		Date verified
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