

Account Application Form – Retail Advisory Clients

Before completing this Account Application Form, please ensure you have read State One's Financial Services Guide for Retail Advisory Clients. If a FSG has not been provided to you, please contact an advisor on (08) 9288 3388 or visit State One's website at www.stateone.com.au.

As per State One Policy & the requirements of the Corporations Act 2001 & the Australian Securities & Investments Commission ("ASIC"), before your advisor can provide you with recommendations, you must provide certain information such as name, address & contact details as well as your investment objectives, financial position & particular needs. **State One treats information provided in this Account Application Form as confidential.**

ACCOUNT TYPE

Select one account only

- | | | |
|--|-------------|---|
| <input type="checkbox"/> Individual | Explanation | Full name |
| <input type="checkbox"/> Joint | Explanation | Full names |
| <input type="checkbox"/> Company | Explanation | Company name |
| <input type="checkbox"/> Trust, Superfund, Minor or Estate | Explanation | Company, trustees' or executors' name, then name of trust, fund, minor or estate. |

Example of CHESS Registered Account Name

Mr John Andrew Black
Mr John Andrew Black + Mrs Victoria Margaret Black
Black and Black Ltd.
Black Enterprise Pty Ltd <Black Family A/C> or Mr John Andrew Black + Mrs Sally Ann Black <Black Super Fund A/C> or Mr John Andrew Black<Melanie Jane Black>

If this is for a One-off Sale please tick box If Margin Lending is required please tick box and ensure Section 3 is completed.

Section 1 Applicant Details

Applicant 1 or Director

Mr / Mrs / Ms / Miss / Dr

For companies, you only need the company TFN. Do not include the individual director TFN.

For security purposes provide a keyword that will help us identify you over the phone. This is compulsory and must be 8-15 characters.

Tax File Number	Date of Birth
Existing Client	Existing Account Number
YES / NO	
Security Keyword	Primary Contact
	YES / NO

Applicant 2 or Director

Mr / Mrs / Ms / Miss / Dr

For companies, you only need the company TFN. Do not include the individual director TFN.

For security purposes provide a keyword that will help us identify you over the phone. This is compulsory and must be 8-15 characters.

Tax File Number	Date of Birth
Existing Client	Existing Account Number
YES / NO	
Security Keyword	Primary Contact
	YES / NO

Contact Details

Residential Address

Postal Address

All correspondence will go to postal address

Contact Phone Numbers

Email Address

Home	Work	Mobile

Section 2 Company, Trust, Superannuation Fund, Minor Account or Estate

Name of Company

Name of Trust, Fund, Minor or Estate

Please attach a certified copy of the relevant pages of the Trust Deed which identifies name of Trust, Trustees, Beneficiaries, Date and Place of Establishment of Trust.

< >	
ABN / ACN	Tax File Number

Section 3 Margin Lending Details

Margin Lender	<input type="text"/>	
Margin Lending Account details	Margin Lending Contact Number	Margin Lending Account No
	<input type="text"/>	<input type="text"/>
Margin Lending Contact Name	<input type="text"/>	

Section 4 Nominated Bank Account

Name of account holder/s	<input type="text"/>	
This is the account into which State One will deposit proceeds of share sales	BSB	Account No.
	<input type="text"/>	<input type="text"/>
Bank	<input type="text"/>	
Branch	<input type="text"/>	

Please Note: Section 8 (Direct Debit Request) will also have to be completed and signed, for us to be able to Direct Debit for Purchases

Section 5 Third Party Authority (if applicable)

To authorise an individual to operate your account as a third party, please complete this section with their details

Mr / Mrs / Ms / Miss / Dr	<input type="text"/>		
	Date of Birth	Relationship	
	<input type="text"/>	<input type="text"/>	
	Occupation	Employer	
	<input type="text"/>	<input type="text"/>	
Residential Address	<input type="text"/>		
Contact Phone Numbers	Home	Work	Mobile
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		
Email Address	<input type="text"/>		
For security purposes provide a keyword that will help us identify you over the phone. This is compulsory and must be 8-15 characters.	Security Keyword	Primary Contact	
	<input type="text"/>	<input type="text"/> YES / NO	

Signature of Third Party	Date
<input type="text"/>	<input type="text"/>
Signature of Applicant 1	Signature of Applicant 2
<input type="text"/>	<input type="text"/>

Section 6 Derivatives (if applicable)

If you would like to deal in Warrants please tick the box. Warrants

Before you can deal in Warrants you will need to:

- Read and agree to the Warrant Appendix contained in our Terms and Conditions available at www.stateone.com.au
- Read the ASX "Understanding trading and investment Warrants" booklet available online at www.asx.com.au/documents/resources/understandingwarrants.pdf
- Read the chi-X "INVESTING IN WARRANTS" booklet available online at <http://cmsau.chi-x.com/Portals/15/Docs/Chi-X%20Australia%20InvestingInWarrantsbooklet2015.pdf>

Section 7 Research & Stock Offerings

Would you like to receive research publications & stock offerings from State One? Yes

Please indicate which of the following you would like to receive:

- | | | |
|--|---|---|
| <input type="checkbox"/> Daily 'Market Opener' | <input type="checkbox"/> Weekly 'Spinnaker' | <input type="checkbox"/> IPO's & Capital Raisings |
| <input type="checkbox"/> Daily Resource Overview | <input type="checkbox"/> Monthly Market Watch | <input type="checkbox"/> Company Research |

Section 8 Direct Debit Request

Request & Authority to Debit	You request and authorise State One Stockbroking Limited (Debit User Identification Number 244449) to arrange, through its own financial institution, for any amount State One Stockbroking Ltd may debit or charge you to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below and paid to State One Stockbroking Ltd, subject to the terms and conditions of the Direct Debit Request Service Agreement (and any further instructions provided below).			
Account Details	Name/s of Account Holder/s			
	BSB Number			
	Account Number			
Financial Institution Details	Financial Institution Name			
	Branch Address			
Acknowledgement	By signing this Direct Debit Request, you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and State One Stockbroking Ltd, as set out in this Request and in your Direct Debit Request Service Agreement.			
Signing		Name	Signature	Date
	Account Holder / Director 1			
	Account Holder / Director 2			

Direct Debit Request Service Agreement

Definitions

Account	The account held at <i>your financial institution</i> from which we are authorised to arrange for funds to be debited.
Agreement	This Direct Debit Request Service Agreement between <i>you</i> and <i>us</i> .
Banking Day	A day other than a Saturday or a Sunday or a public holiday listed throughout Australia.
Debit Day	The day that payment by <i>you</i> to <i>us</i> is due.
Debit Payment	A particular transaction where a debit is made.
Direct Debit Request	The Direct Debit Request between <i>us</i> and <i>you</i>
Us or We	State One Stockbroking Limited, (the Debit User) <i>you</i> have authorised by signing a <i>direct debit request</i> .
You	The customer who signed the <i>direct debit request</i> .
Your Financial Institution	The financial institution where <i>you</i> hold the <i>account</i> that <i>you</i> have authorised <i>us</i> to arrange to debit.

1 Debiting your account

- 1.1 By signing a direct debit request, you have authorised us to arrange for funds to be debited from your account. You should refer to the direct debit request and this agreement for the terms of the arrangement between us and you.
- 1.2 We will only arrange for funds to be debited from your account:
- for fees and charges specified on our FSG or fees and charges agreed to by you as per our terms and conditions;
 - if we have sent a trade confirmation (contract note) to the address nominated by you on this Direct Debit Request or subsequent change of address form or the email address nominated by you on the 'Agreement form for Receipt of Confirmation (Contract) Notes in Electronic Form via Email' which specifies the amount payable by you to us and when it is due;
 - on submission of an Mfund application.
- 1.3 State One reserves the right to offset purchases and sales due on the same settlement date.
- 1.4 If the debit day falls on a day that is not a banking day, we may direct your financial institution to debit your account on the following banking day. If you are unsure about which day your account has or will be debited you should ask your financial institution.

2 Changes by us

- 2.1 We may vary any details of this agreement or a direct debit request at any time by giving you at least 1 days' written notice.

3 Changes by you

- 3.1 Subject to 3.2 and 3.3, you may change the arrangements under a direct debit request by notifying us in writing at State One Stockbroking PO Box 7625, Cloisters Square WA 6850 or by telephoning us on 089 288 3388 during business hours or by arranging it through your own financial institution.
- 3.2 If you wish to stop or defer a debit payment you must notify us in writing by 10 o'clock the day before the next debit day. This notice should be given to us in the first instance.
- 3.3 You may also cancel your authority for us to debit your account at any time by giving us 5 days notice in writing before the next debit day. This notice should be given to us in the first instance.

4 Your obligations

- 4.1 It is your responsibility to ensure that there are sufficient clear funds available in your account to allow a debit payment to be made in accordance with the direct debit request.
- 4.2 If there are insufficient clear funds in your account to meet a debit payment:
- you may be charged a fee and/or interest by your financial institution;
 - you may also incur fees or charges imposed or incurred by us; and
 - you must arrange for the debit payment to be made by another method or arrange for sufficient clear funds to be in your account by an agreed time so that we can process the debit payment.
- 4.3 You should check your account statement to verify that the amounts debited from your account are correct
- 4.4 If State One Stockbroking Limited is liable to pay goods and services tax ("GST") on a supply made in connection with this agreement, then you agree to pay State One on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

5 Dispute

- 5.1 If you believe that there has been an error in debiting your account, you should notify us directly on 08 9288 3388 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly.
- 5.2 If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to your query and will arrange for your account to be adjusted (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.
- 5.3 If we conclude as a result of our investigations that your account has not been incorrectly debited we will respond to your query by providing you with reasons and any evidence for this finding.
- 5.4 Any queries you may have about an error made in debiting your account should be directed to us in the first instance so that we can attempt to resolve the matter between us and you. If we cannot resolve the matter you can still refer it to your financial institution which will obtain details from you of the disputed transaction and may lodge a claim on your behalf.

6 Accounts

- 6.1 You should check:
- with your financial institution whether direct debiting is available from your account as direct debiting is not available on all accounts offered by financial institutions.
 - your account details which you have provided to us are correct by checking them against a recent account statement; and
 - with your financial institution before completing the direct debit request if you have any queries about how to complete the direct debit request.

7 Confidentiality

- 7.1 We will keep any information (including your account details) in your direct debit request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.
- 7.2 We will only disclose information that we have about you:
- to the extent specifically required by law; or
 - for the purposes of this agreement (including disclosing information in connection with any query or claim).

8 Notice

- 8.1 If you wish to notify us in writing about anything relating to this agreement, you should write to State One Stockbroking Ltd, PO Box 7625, Cloisters Square WA 6850.
- 8.2 We will notify you by sending a notice in the ordinary post to the address you have given us in the DDR.
- 8.3 Any notice will be deemed to have been received on the third banking day after posting.

Section 9 Identification – Anti Money Laundering & Counter Terrorism Financing Requirements

Each Applicant and Third Party on this Account Application Form must ensure that they meet the identification requirements as outlined in the Anti Money Laundering and Counter Terrorism Financing Act ("AML/CTF").

Therefore each applicant in Section 1 (and 5 if Third Party) is required to provide identification records as noted below.

We require you to **provide original documents or an original certified copy¹ of the documents** listed below in order to meet our AML/CTF obligations. Please do not send us your original documents such as your passport.

A. PRIMARY IDENTIFICATION DOCUMENTS FOR INDIVIDUALS

- Current licence or permit issued under a law of a State or Territory containing the full name, date of birth and current residential address of the applicant is sufficient on its own. Best example of this would be a Drivers Licence.

If a Drivers Licence is not available, please provide identification as outlined below:

- A Passport issued by the Commonwealth which may have expired within the previous 2 years, PLUS one of the items in Section C below **OR**
- A Passport or similar document issued for the purpose of international travel that, contains a photo and signature of the person in whose name the document is issued, is issued by a foreign government, the United Nations or an agency of the United Nations, if it is written in a language that is not understood by the person carrying out the verification – is accompanied by an English translation prepared by an accredited translator. PLUS one of the items in Section C below **OR**
- Proof of Age Card (issued by an Australian State or Territory bearing the applicants photograph, name and date of birth) PLUS one of the items in Section C below **OR**
- A National Identity Card that contains a photograph and the signature of the person in whose name the document is issued, is issued by a foreign government, the United Nations or an agency of the United Nations and if it is written in a language that is not understood by the person carrying out the verification – is accompanied by an English translation prepared by an accredited translator. PLUS one of the items in Section C below

If the applicant does not have any of the primary identification documents in Section A above, an original or an original certified copy of **ONE** item of documentation from the Primary non-photographic identification list in Section B below **PLUS ONE** item of documentation from the Secondary Identification requirements in Section C below must be provided;

B. PRIMARY NON-PHOTOGRAPHIC IDENTIFICATION DOCUMENTS

- Australian birth certificate PLUS one of the items in Section C below; **OR**
- Australian birth extract PLUS one of the items in Section C below; **OR**
- Australian citizenship certificate PLUS one of the items in Section C below; **OR**
- A citizenship certificate issued by a foreign government that, if it is written in a language that is not understood by the person carrying out the verification, is accompanied by an English translation prepared by an accredited translator PLUS one of the items in Section C below;
- Pension card issued by Centrelink that entitles the person in whose name the card is issued, to financial benefits PLUS one of the items in Section C below;

C. SECONDARY IDENTIFICATION DOCUMENTS

- Letter from Centrelink within the last 12 months regarding a government assistance payment showing your name and current residential address, **OR**
- Utilities bill or local government notice issued within the last three months showing your name and current residential address as shown on the application form, **OR**
- Notice issued by the ATO within the last 12 months showing your name and current residential address as shown on the application form.

Additional identification requirements for non-individual account types:

Sole Trader

- Document(s) showing full business name (if any) and full address of the principal place of business (if any); and ABN (if any) e.g. business letterhead.

Domestic Company

In addition to the identification documents for each director/secretary/third party on the company account please provide:

- Document showing the full name of the company as registered by ASIC, the full address of the company's registered office in Australia, the full address of the company's principal place of business, if any; the ACN issued to the company e.g. Certificate of Incorporation and Company Letterhead.

For information regarding Public Companies, or Registered Foreign Company or Unregistered Foreign Company applications please speak with your Advisor.

SMSF, Trust or Estate

In addition to the identification documents for each Trustee/Third Party please provide:

- Document showing the type of trust and the country in which the trust was established and the full name of the trust, e.g. trust deed, certified copy or certified extract of the trust deed, will, probate (where applicable) and death certificate.
- Please ensure that you have provided the full name of each beneficiary in section C of the application form in respect of the trust, if they differ from the Trustees.

If you have a corporate Trustee, please ensure you have provided the information required by the Domestic Company Section above.

Partnership, or other

In addition to the identification documents for each Partner please provide:

- Document showing the full name of the partnership from an original partnership agreement or a certified copy or certified extract of the partnership agreement; or a certified copy or certified extract of minutes of a partnership meeting.
- Full registered business name and/or trading name (if any) of the partnership from original letterhead.
- The country in which the partnership was established.
- If the partnership is regulated by a professional association, the name of the professional association and relevant membership details.

Should you wish to open an account for an **Association, Registered co-operative or Government Body**, please discuss your application and identification requirements with your Advisor.

Section 9 Identification – Anti Money Laundering & Counter Terrorism Financing Requirements (Cont.)

1. Certified Copy

Certified copy means an extract that has been certified as a true copy of some of the information contained in a complete original document by one of the persons described below.

People who can certify documents or extracts are:

1. a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described);
2. a judge of a court;
3. a magistrate;
4. a chief executive officer of a Commonwealth court;
5. a registrar or deputy registrar of a court;
6. a Justice of the Peace;
7. a notary public (for the purposes of the Statutory Declaration Regulations 1993);
8. a police officer;
9. an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
10. a permanent employee of the Australian Postal Corporation with 2 or more years of 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 continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993);
13. a finance company officer with 2 or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993);
14. an officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees.
15. a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.

Please note that for the purposes of this application, applicants cannot certify and/or witness their own documents should they meet the above-mentioned criteria.

Section 10 Signing and Acknowledgement by Applicants

Each Applicant (including any authorised Third Party) acknowledges by signing this Application that they have received, read on the date signed, understood and agree to be bound by the following documentation:

- a. State One Financial Services Guide – for Retail Advisory Clients available on the State One website www.stateone.com.au;
- b. State One Client Agreement – Terms and Conditions available on the State One Website ;
- c. Participant Sponsorship Agreement (for CHESS) contained in the Terms and Conditions;
- d. Explanation of Participant Sponsorship Agreement (for CHESS) contained in the Terms and Conditions;
- e. State One Best Execution Policy, Privacy Policy and Dealing Policies which are available on the State One website;
- f. Direct Debit Request Services Agreement (where applicable);
- g. ASX Warrant Agreement (where applicable) contained in the Terms and Conditions;
- h. Warrants – ASX educational brochure “Understanding Trading and Investment Warrants” (where applicable) available on the ASX website www.asx.com.au;
- i. Options – ASX educational brochure “Understanding Options Trading” (where applicable) available on the ASX website;
- j. ETO Product Disclosure Statement (where applicable);
- k. GST Exemption Form for International Clients (where applicable) available on the State One website.

Each Applicant (including any authorised Third Party) by signing this Application agrees and / or confirms:

- a. that State One may remit funds to your choice of Nominated Bank Account on request;
- b. that confirmations and other trading information may be sent to you electronically;
- c. to be sponsored by State One under the terms of the Participant Sponsorship Agreement;
- d. to be bound by the actions of any Third Party authorised to give instructions in respect of this account;
- e. that details provided in Section 12 are an accurate representation of my/our investment objectives, financial position & particular needs, **OR**
- f. that we have not disclosed our personal information & hence acknowledge our wish to open an Execution Only / General Advice account; **AND**
- g. that true certified copies of original identification documents have been supplied (where applicable).

“Client” in the Client Agreement refers to the Applicants in this Account Application Form.

Your Advisor's Name

Applicant 1 or Director (if sole director please tick box) <input type="checkbox"/>	Applicant 2 or Director/Company Secretary
Name:	Name:
Signature:	Signature:
Date:	Date:

Office Use Only

Dealer	Advisor Number	A/C Number
BR	HIN	Date
CMT	ASX	GST Yes / No
Limit	AML L M H	Copy Confirmation Yes / No
Sponsorship Yes / No	ML Yes / No	Approved on behalf of State One by
Incomplete Yes / No	DFAT Yes / No	
Initials	Sign Off	Approved on / /

Section 12 Statement of Investment Objectives and Financial Position

To enable State One Stockbroking Ltd to provide Advice to Retail Clients (and discharge its obligations under the Corporations Act in doing so), we are required to make recommendations appropriate to your requirements. We are obliged to ask for the particulars of your investment objectives, financial situation & particular needs. Please be assured that all information provided will be treated in confidence.

We understand that you may not wish to disclose some or all of the information requested. In such cases, State One will not be able to provide you with fully informed advice, and your rights under the Corporations Act may be affected as a result.

In order for State One to provide Personal Advice tailored to your needs, **ALL** sections below must be completed in full. If you do not wish to disclose some or all of the required information, you may choose to have a General Advice Only account. If you do not complete **ALL** of the Sections you will be deemed to have elected the General Advice Only option. General Advice attracts a lower brokerage rate.

For more detail regarding Personal vs General Advice, refer to our Financial Services Guide - Retail Advisory Clients.

Please select the type of account you wish to open

- General Advice Account - Thank you for completing the form, Section 12A to 12J is not required for General Advice Accounts.
- Personal Advice Account - Please Complete Section 12A to 12J

Note: where there is more than one applicant, details may differ for each individual. Please complete the Financial Circumstances for all applicants. Unless otherwise advised confirmation of your Investment Objectives and Financial Position will be sent to the Primary contact only.

Investment Objectives

Section 12A - Investment Objectives

Please rank in order of importance (1: most important & 9: least important)

- Capital Preservation
- Income
- Balanced
- Growth
- Other
- Aggressive Growth
- Trading
- Speculative
- Leveraged Growth

Section 12B - Investing Interests

Please tick to indicate.

- Blue Chip
- Industrials
- Margin Lending
- International Equities
- Fixed Interest
- Property Trusts
- Dividend Reinvestment
- New Floats (IPO's)
- Exchange Traded Options
- Managed Funds
- Short Selling
- Speculative
- Franked Dividends
- Preference Shares

Section 12C - Risk Profile

Please tick to indicate.

Category	Key Characteristics
<input type="checkbox"/> Very Conservative	- Not willing to accept any capital risk or volatility. - Priority is to safeguard investment capital. - Prepared to accept low returns to preserve capital.
<input type="checkbox"/> Conservative	- Prepared to accept minimal capital risk and volatility. - Priority is to preserve investment over medium to long term.
<input type="checkbox"/> Moderate	- Prepared to accept some capital risk and volatility. - Prepared to take short term risk to gain longer term growth. - Portfolio balance is of concern.
<input type="checkbox"/> Aggressive	- Prepared to accept high capital risk and possible high volatility for growth/investment return. - Prepared to sacrifice short term safety to maximise longer term capital growth. - Portfolio balance is of concern, but willing to accept some imbalance.
<input type="checkbox"/> Very Aggressive	- Prepared to accept a high risk/return philosophy. - Prepared to sacrifice investment for possible high returns. - Portfolio balance is of no concern.

Section 12D - Investment Time Horizons

Please tick to indicate.

- Less than 18 months
- 18 months – 3 years
- 3 – 5 years
- 5 – 7 years
- More than 7 Years

Financial Circumstances – Applicant 1

Section 12E - Investment Experience
Please tick to indicate.

Investment	First Time	Inexperienced	Some Experience	Very Experienced
Australian Equities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exchange Traded Options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warrants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Margin Lending	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
International Equities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fixed Interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Property Trusts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managed Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other – please specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 12F - Investment Portfolio
Please indicate current value, net of debt.

Property	\$	<input type="text"/>
Equities	\$	<input type="text"/>
Options/Warrants	\$	<input type="text"/>
Investment Funds	\$	<input type="text"/>
Fixed Interest	\$	<input type="text"/>
Cash at Bank	\$	<input type="text"/>
Other	\$	<input type="text"/>

Section 12G - Net Asset Position
Please tick to indicate.

<input type="checkbox"/> < \$50,000	<input type="checkbox"/> \$50,001 - \$100,000
<input type="checkbox"/> \$100,001 - \$250,000	<input type="checkbox"/> \$250,001 - \$500,000
<input type="checkbox"/> \$500,001-\$1,000,000	<input type="checkbox"/> \$1,000,001+

Section 12H - Annual Income
Please tick to indicate.

<input type="checkbox"/> \$0 - \$30,000	<input type="checkbox"/> \$30,001 - \$50,000
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$100,001 - \$150,000
<input type="checkbox"/> \$150,001 - \$200,000	<input type="checkbox"/> \$200,001+

Section 12I - Annual Lifestyle Expenditure
Please tick to indicate.

<input type="checkbox"/> \$0 - \$20,000	<input type="checkbox"/> \$20,001 - \$30,000
<input type="checkbox"/> \$30,001 - \$40,000	<input type="checkbox"/> \$40,000+

Financial Circumstances – Applicant 2

Section 12E - Investment Experience
Please tick to indicate.

Investment	First Time	Inexperienced	Some Experience	Very Experienced
Australian Equities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exchange Traded Options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warrants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Margin Lending	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
International Equities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fixed Interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Property Trusts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managed Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other – please specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 12F - Investment Portfolio
Please indicate current value, net of debt.

Property	\$	<input type="text"/>
Equities	\$	<input type="text"/>
Options/Warrants	\$	<input type="text"/>
Investment Funds	\$	<input type="text"/>
Fixed Interest	\$	<input type="text"/>
Cash at Bank	\$	<input type="text"/>
Other	\$	<input type="text"/>

Section 12G - Net Asset Position
Please tick to indicate.

<input type="checkbox"/> < \$50,000	<input type="checkbox"/> \$50,001 - \$100,000
<input type="checkbox"/> \$100,001 - \$250,000	<input type="checkbox"/> \$250,001 - \$500,000
<input type="checkbox"/> \$500,001-\$1,000,000	<input type="checkbox"/> \$1,000,001+

Section 12H - Annual Income
Please tick to indicate.

<input type="checkbox"/> \$0 - \$30,000	<input type="checkbox"/> \$30,001 - \$50,000
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$100,001 - \$150,000
<input type="checkbox"/> \$150,001 - \$200,000	<input type="checkbox"/> \$200,001+

Section 12I - Annual Lifestyle Expenditure
Please tick to indicate.

<input type="checkbox"/> \$0 - \$20,000	<input type="checkbox"/> \$20,001 - \$30,000
<input type="checkbox"/> \$30,001 - \$40,000	<input type="checkbox"/> \$40,000+

Section 12J - Signing and Acknowledgement

I/We confirm that the information provided above is a true and correct reflection of my/our investment objectives and financial position as at the date indicated below. Should any circumstances change, I will inform State One immediately.

	Name	Signature	Date
Applicant 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Applicant 2	<input type="text"/>	<input type="text"/>	<input type="text"/>