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ORDER FORM - TRUST DEED

From: _____ **Address:** _____

Tel: _____ **Fax:** _____

Email: _____

PRICE \$275.00 (Subject to change on notice) Payment COD

DISCRETIONARY TRUST

NAME OF TRUST: _____

DATE: / /

TRUSTEE(S) _____

ADDRESS of TRUSTEE(S)

IF TRUSTEE IS A COMPANY: ACN.: _____

FULL NAMES OF DIRECTORS:

PRINCIPAL(S) OF TRUST: (Appointer(s) are (Person(s) who will have the power to appoint and/or remove the Trustee)

SETTLOR: STRAM NOMINEES PTY LTD

SETTLEMENT SUM: TEN DOLLARS (\$10.00) Provided by Settlor

ADDRESS FOR FIRST MEETING OF TRUSTEE(S):

PRIMARY BENEFICIARIES: (named in the Trust Deed)

1. _____

2. _____

3. _____

4. _____

Persons in the following categories are not named but can be nominated later by Principal(s)

SECONDARY BENEFICIARIES: Relatives of Primary Beneficiaries are included (i.e. parents, brothers, sisters, children, grandchildren, nieces and nephews).

TERTIARY BENEFICIARIES: All companies, trusts, charitable institutions or persons in which any of the Beneficiaries are related or associated.

We authorise you to debit our Bank Card/Visa/Mastercard for the sum of \$ _____

Card Holder

Card No.

Signature

Expiry Date / /

**THIS COMPLETED FORM SHOULD BE RETURNED TO OUR OFFICE ON FAX (07) 5520 1488
PLEASE CONTACT US IF YOU REQUIRE ANY ASSISTANCE OR ADVICE**