

# JAMIESONS CHARTERED ACCOUNTANTS DISCRETIONARY TRUST DEED ORDER FORM

| YOUR DETAILS    |  |
|-----------------|--|
| <b>Name:</b>    |  |
| <b>Address:</b> |  |
| <b>Phone:</b>   |  |
| <b>Email:</b>   |  |

| TRUST DETAILS  |   |
|--|---|
| <b>Trust Name:</b>                                     |   |
| <b>Primary Beneficiaries:<br/>(Full Names)</b>         | 1. _____ Tax File Number _____ Date of Birth: _____<br>2. _____ Tax File Number _____ Date of Birth: _____<br>3. _____ Tax File Number _____ Date of Birth: _____<br>4. _____ Tax File Number _____ Date of Birth: _____<br>(Please state full name if individual/s & if company please state company name, ACN & address of registered office) |
| <b>Trustee Details:<br/>(Include ACN if a Company)</b> |   |
| <b>Appointer Details:<br/>(Full Names)</b>             | 1. _____<br>2. _____  |
| <b>Nominated Charity:</b>                              |   |

|  |                    |
|--|--------------------|
| <b>Payment by Credit Card:</b>   |                    |
| <b>CARDHOLDER FULL NAME:</b> _____   |                    |
| <b>CARD NUMBER:</b> _____  |                    |
| <b>CARD TYPE:</b> MASTERCARD                      VISA                      BANKCARD |                    |
| <b>EXPIRY DATE:</b> _____  |                    |
| <b>AMOUNT (AUD): \$</b> _____  | <b>DATE:</b> _____ |
| <b>SIGNATURE:</b> _____  |                    |



**Fax details to  
Jamiesons Chartered  
Accountants  
(07) 5503 1477**



**Post to  
Jamiesons Chartered  
Accountants  
PO Box 307  
SOUTHPORT QLD 4215**



**Questions?  
(07) 5503 0466**