

**INSTRUCTION SHEET FOR FIXED UNIT TRUST MODULE**

**Delivery Instructions**

Please email documents to the following address:

Please send completed documents to:

**Payment Instructions (please tick):**

- \$440 by email
- \$550 by post
- \$45 Munro / \$65 for Non-Munro Revenue NSW stamping** *(where we attend to stamping the Deed we will send you a Revenue NSW Notice of Assessment for you to pay \$510 stamp duty directly)*
- Please send me an account
- Please charge my credit card

<b>Credit Card</b>	<b>Bankcard</b> <input type="checkbox"/>	<b>Visa</b> <input type="checkbox"/>	<b>Mastercard</b> <input type="checkbox"/>
<i>(We are unable to process American Express or Diners)</i>			
<b>Card No.</b>			
<b>Expiry Date</b>			
<b>Credit Card CCV No.</b>			
<i>(Last 3 digits after card no. on front or reverse of card – we cannot process your payment without this number)</i>			
<b>Name on Card</b>			
<b>Amount</b>	<b>\$</b>		
<b>Cardholder's Signature</b>			
<i>Where you pay our account by credit card, a surcharge equal to the amount of the merchant's fee may be added and you agree to pay such surcharge.</i>			

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f +61 2 9256 3833  
e: munrolawyers@taxlegal.com.au  
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Please print clearly.

**Name of the Settlor**

The Settlor can not be a beneficiary of the trust

The Settlor should ideally be a family friend

The Settlor is required to make a gift of \$20.00, sign the deed and has no further involvement in the trust

**Address of the Settlor**

**Name of the Trustee**

**ACN of the Trustee**

**Address of the Trustee**

**Name of First Director/Sole Director of Trustee:**

**Name of all other Directors of Trustee:**

**Residential Address of First/Sole Director of Trustee:**

**Jurisdiction of Trust**

In the State of

**Name of the Trust**

The

Unit Trust

**Name of First Unitholder (include ACN and name of trust if applicable)**

**Address of First Unitholder**

**Name of First Director/Sole Director of First Unitholder:**

**Name of all other Directors of First Unitholder:**

**Name of Second Unitholder (include ACN and name of trust if applicable)**

**Address of Second Unitholder**

**Name of First Director/Sole Director of Second Unitholder:**

**Name of all other Directors of Second Unitholder:**