CNL INCORPORATIONS CNL

31 Albion Street Surry Hills NSW 2010 www.incorporations.com.au

CORPORATE NETWORK LTD

abn: 79 079196768 Ph : 02 9212 6399 Fax: 02 9281 1970

cnl@incorporations.com.au

UNIT TRUST INSTRUCTIONS

		PART 1							
FROM: DATE	FIRM								
ABN		ACN							
DESCRIPTION	(Accountants/Solicitors/etc)								
PARTNER		CONTACT							
SUITE/FL	BUILDING								
STREET NO. & NAME	SUBURB/CITY								
STATE		POSTCODE							
PHONE		FAX							
EMAIL									
	⊠ Paper \$350	☐ PDF ONLY \$299 - UPFRONT PAYMENT ONLY SEE PAYMENT TAB							
	FIXED	NOT FIXED							
I/WE ADVISE CORPORATE NETWORK LTD THAT:	WE ACCEPT RESPONSIBILITY FOR PAYMENT OF YOUR CURRENT FEES; AND, HAVE READ AND AGREE TO THE TERMS AND CONDITIONS. ACCEPT								
NAME OF TRUST:	-								
LEGAL JURISDICTION	(NAME THE STATE WHERE	THE DEED WILL BE STAMPED):							
DATE TO BE SIGNED	(IF BLANK, DATE TO BE INSERTED WHEN DEED IS SIGNED):								
ADDRESS OF TRUST:	(FOR CORRESPONDENCE, SERVICE OF NOTICE, ETC)								
AT THE OFFICE OF (C/-)									
SUITE/FL		BUILDING							
STREET NO. & NAME		SUBURB/CITY							
STATE	POSTCODE								
REQUIRED MAJORITY	(PASS RESOLUTIONS AT UN	ITHOLDERS MEETING) DEF =100%: %							
TRUSTEE(s) MEETINGS	(PLACE)								
	(PRESENT)	·							
•	(PRESENT)								
BANK	· · · · · · · · · · · · · · · · · · ·	BRANCH							
SIGNATORIES		· · · · · · · · · · · · · · · · · · ·							
METHOD	SIGNATORIES JOINTL	Y ANY ONE SIGNATORY ALONE							
AUDITOR	(FIRM)								
	(ADDR)								
	•	BE A UNITHOLDER, DIRECTLY OR BENEFICIALLY. UNITS IS \$1-00 EACH							
		E COMPANY IS BEING INCORPORATED BY CNL							

TRUST NA	AME:						PAR		
NAME	GIVEN NAMES								
	SURNAME	ACN (IF A COY)							
	IN TRUST FOR								
ADDRESS	: C/-								
	UNIT/SUITE/FL	BUILDING							
	STREET NO. & NAM	E							
	SUBURB/CIT	Υ							
	STAT		POSTCODE						
	ROLE IN TRUS	<u>г</u>	TRUSTEE UNITHOLD				OLDER		
	UNITS REQUIRED	CLASS	NUMBER	ISSUE PRICE	AMT PAID	AMT DUE	CASH/KINE		
NAME	GIVEN NAMES								
	SURNAME	:	ACN (IF A COY)						
	IN TRUST FOR	1							
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NAME	GIVEN NAMES								
	SURNAME	ACN (IF A COY)							
	IN TRUST FOR								
ADDRESS:	C/-								
	UNIT/SUITE/FL	BUILDING							
9	STREET NO. & NAME	<u>:</u>							
	SUBURB/CITY	r							
	STATE	<u>:</u>		P	OSTCODE				
	ROLE IN TRUST	TRUSTEE UNITHOLDER							
	UNITS REQUIRED	CLASS	NUMBER	ISSUE PRICE	AMT PAID	AMT DUE	CASH/KIND		
			DETAILS OF	MORE PARTI	IES ARE ATTA	ACHED			
			0 0.						

TRUST NAM	ΛE:						PAR		
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	SURNAME	ACN (IF A COY)							
	IN TRUST FOR								
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CTI	UNIT/SUITE/FL BUILDING								
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	SUBURB/CITY				OCTCODE				
	STATE ROLE IN TRUST		POSTCODE						
	-	TRUSTEE UNITHOLDER							
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	UNIT/SUITE/FL		BUILDING					
	STREET NO. & NAME							
	SUBURB/CITY							
	STATE	POSTCODE						
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