

Customer verification form – Associations.

All fields are mandatory, unless specified otherwise.

1. Document checklist.

Prior to completing this form, please review this section and ensure you have all required documents ready and obtained the necessary certifications (listed below).

Documents required

Completed Customer Verification Form – Association (this form).	Who needs to completeChairperson/President, Secretary, Treasurer, or equivalent.
Certified ID Documents ONE Primary Photographic Identification Document	Who needs to provide Certified ID Documents:Chairperson/President, Secretary, Treasurer, or equivalent
OR	 Each Beneficial Owner as nominated on this form The Individual (if not a Beneficial Owner) who signs this form.
ONE Primary Non-Photographic Identification Document	Acceptable documents Valid Australian driver's licence Medicare card
ONE Secondary Identification Document	 Australian passport Australian birth certificate Foreign passport issued by a foreign government

1. Document checklist (continued).

Please provide a certified copy of at least one of the following verification documents:

- Latest copy of the minutes of a meeting of the Association signed by the Chairman, President, Secretary, Treasurer or equivalent who must be fully identified
- Certificate of registration or equivalent document from the relevant government body
- Constitution or rules of the Association.

Example Certified Copy of verification document.

I, John Sample, as Justice of the Peace, certify that these Minutes

of the Annual General Meeting, are a true and correct copy of

the original.

Minutes of Annual **General Meeting** The Smith Enviro Foundation

Meeting held: 20 November 2022

A Attendees: 1 February 2023 Attendees: IF Chairperson - Frankie Charlie Secretary - Sam Jones Treasurer - Bhavya Kumar Members - Paul Smith, Chidi Abara, Christine Jones Approval of minutes from last meeting - Sam Jones

Discussion

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aligua. Ut enim ad minim veniam, guis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum

Minutes submitted by Sam Jones Minutes approved by Frankie Charlie, President

Hu

Minutes of Annual General Meeting certified and signed by Justice of the Peace.

2. Steps required.

Step 1: Ensure all relevant sections of the form are completed and the customer declaration is signed

Step 2: Attach all certified copies of supporting documents

Step 3: Return this completed form and certified copies of supporting documents as per Page 1 by email, post, or at a branch.

Email - businessIDBOM@bankofmelbourne.com.au

OR

Post – If you are located in Australia, please send via Reply Paid to:

Business Identification Team Reply Paid 91348 SYDNEY NSW 2001

No stamp is required

If you are located outside Australia, please pay for postage and reply to:

Business Identification Team GPO Box 1806 SYDNEY NSW 2001 Australia

OR

Branch - If visiting a branch, don't forget to bring at least 2 forms of identification as per Certified ID documents section on Page 1. For certification instructions, go to the Bank of Melbourne website and search BizSecure then go to the FAQ section -"How do I certify my identity?"

Find your nearest branch by visiting the Bank of Melbourne website and search "Branch Location".

If you have any queries, please call our dedicated Business Identification Team on 1800 100 238 from anywhere in Australia (or +61 2 9155 7528 if calling internationally), 9am – 5pm AEST, Monday to Friday.

© Bank of Melbourne – A Division of Westpac Banking Corporation ABN 33 007 457 141 AFSL and Australian credit licence 233714. WBCBOMBIZSECVF04

3. Association details.

Full name of the Association

Other name(s) under which the Association carries on their business (if any)

Full legal name including any middle names of chairperson/president or equivalent officer

Full legal name including any middle names of secretary or equivalent officer

Full legal name including any middle names of treasurer or equivalent officer

Association contact email address

Nature of business activities - Australia and New Zealand Standard Industry Code (ANZSIC) Please provide us with details of the industry in which your business operates - for example, real estate, dairy manufacturer.

ABN issued to the Association (if any)

Association Type

- Incorporated Association
- O to Incorporated Association section 4
- Unincorporated Association
- O to Unincorporated Association section 5

4. Incorporated Association's details.

This section is to be completed by Incorporated Associations only.

Please provide one of the following:

Tick one and provide details below:

Full address of the Association's principal place of administration, including country (not a PO Box)

Full address of the Association's registered office including country (not a PO Box)

Full name and residential address, including country (not a PO Box) of the Association's Public Officer, or if there is no such person, then of the Association's chairperson/president, secretary treasurer or equivalent officer

No ABN

4. Incorporated Association's details.

Street		
Suburb	State	Postcode

Country	of	registration	/incorpc	oration
---------	----	--------------	----------	---------

If incorporated in Australia, the State/Territory of registration/incorporation of the Association

Identification number (if any) issued upon incorporation by the State/Territory or overseas body responsible for incorporation

So to Section 6

5. Unincorporated Association's details.

This section is to be completed by Unincorporated Associations only.

Full address of the Association's principal place of administration, including country (not a PO Box) (if any)

Street

Suburb State Postcode Country of Establishment Country of Establishment Country of Establishment

State/Territory of Establishment

Date of Establishment



Individual(s) who is signing on behalf of the Association. Please note these individuals need to be fully identified (*Chairman/ President /Secretary/Treasurer or Equivalent)

6. Foreign Tax Residency.

Is the association a tax resident of any country outside of Australia?

Yes Please indicate below the country(ies) outside of Australia in which the association is a resident for tax purposes and each country's associated Tax Identification Number (TIN)* (Min 1 – Max 5):

	Country	Foreign TIN
1		
2		
3		
4		
5		

No **So to next question**

* A Foreign TIN is an identifying number or equivalent issued by the association's country of tax residency that is used for tax purposes. If you're a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.

7. Purpose of Business Relationship/Source of funds/Source of wealth.

Purpose of business relationship (please select one or more options)

This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons for dealing with us. Please indicate **all** your reasons.

Transactional	Wealth	Correspondent banking
Savings	Short-term borrowing	Financial markets
Protection	Long-term borrowing	
Source of funds (please select one or m	ore options)	
This refers to the origin of the funds that multiple sources of funds. Please indicate		o between you and us. Many customers have
Commission	Tax refund	External investment/capital injection
Bonus	Gift/donation	Mergers and acquisitions
Business profits	Government grant	Controlled money account
Loan	Business income/earnings	Liquidation of assets
Rental income	Investment income/earnings	Insurance payment
Sale of assets	Corporate investments earnings	Compensation payment
Additional sources (please specify)		
Source of wealth (please select one or	more options)	
This refers to the origin of your total net	assets/total net worth. Many customers wi	ll have multiple sources of wealth. Please
indicate all your sources of wealth.		
Business profits	Gift/donation	Owns real estate/property
🗌 Rental income	Business income/earnings	Mergers and acquisitions
Insurance payment	Investment income/earnings	Controlled money account
Liquidation of assets	Corporate investments earnings	Compensation payment
Sale of assets		
Additional sources (please specify)		

8. Beneficial Owners.

Full name (given name/s and family name), full address (not a PO Box), date of birth and type of relationship of each INDIVIDUAL who is a Beneficial Owner. Please attach certified copies of identification documentation for all (Beneficial Owners) as per the Document Checklist.

A Beneficial Owner of an Association refers to:

- 1. Each individual who owns (either directly or indirectly) 25% or more of the Association; OR
- 2. If no one owns 25% or more, each Individual that controls (either directly or indirectly) the Association.

Other Individual – any individual who has the capacity to make financial and operating decisions on behalf of the Association, aside from the Chairman.

If you're a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.

If you have additional Beneficial Owners, please copy the Beneficial Owner section and provide their details.

Beneficial Owner 1

Full name (as per identification document)

Other name(s) (if any)

Are you a Bank of Melbourne customer? If yes, then please provide your Customer Number (Your Customer Number can be found on your statement in Bank of Melbourne Online Banking)

Date of birth

Employment Type (e.g. Full Time, Part Time, Casual)

Occupation

Full address (not a PO Box)

Street

Suburb	c	State	Postcode
Mobile number	Email address		

Redundancy

Sale of assets

Insurance payment

Additional sources (please specify)

8. Beneficial Owners (continued		
Is Beneficial Owner 1 a tax resident of	any country outside of Australia?	
Yes > Please indicate below the	e country(ies) in which Beneficial O	wner 1 is a resident for tax purposes
_	iated Tax Identification Number (TII	
Country		Foreign TIN
1		
3		
4		
5		
No So to next question		
		residency that is used for tax purposes. If you're a tax resident in a d include publicly available information) from an official authority
Purpose of business relationship (plea	ase select one or more options)	
This refers to your reasons for engaging	g with us to obtain products and ser	rvices. Customers may have multiple reasons for dealing
with us. Please indicate all your reason	S.	
Transactional	Wealth	Correspondent banking
Savings	Short-term borrowing	Financial markets
Protection	Long-term borrowing	
Source of funds (please select one or	more options)	
This refers to the origin of the funds the multiple sources of funds. Please indica		ationship between you and us. Many customers have
Salary/wages		Compensation payment
	Redundancy	Gift/donation
Bonus	Liquidation of assets	☐ Windfall
	Government benefits	Tax refund
Business profits	Superannuation/pension	Insurance payment
Sale of assets	Investment income/earnings	. ,
🗌 Rental Income	Business income/earnings	
Additional sources (please specify)	_	
Source of wealth (please select one o	r more options)	
This refers to the origin of your total ne	t assets/total net worth. Many cust	omers will have multiple sources of wealth. Please
indicate all your sources of wealth.	,	
Government benefits	Windfall	Business income/earnings
Business profits	Inheritance	Compensation payment
Rental income	Liquidation of assets	Gift/donation

Employment income/earnings

Superannuation/pension

Investment income/earnings

Owns real estate/property

None

Beneficial Owner 2		
Full name (as per identification document	:)	
Other name(s) (if any)		
-	f yes, then please provide your Customer Number your statement in Bank of Melbourne Online Banking)	Date of birth
		/ /
Employment Type (e.g. Full Time, Part Tin	me, Casual)	
Occupation		
Full address (not a PO Box) Street		
Suburb	State	Postcode
Mobile number	Email address	
Is Beneficial Owner 2 a tax resident of any	v country outside of Australia?	
	country(ies) in which Beneficial Owner 2 is a resident for tax	
_	ted Tax Identification Number (TIN)* (Min 1 – Max 5):	μαιμορερ

Foreign TIN Country 1

2 3 4 5

No

So to next question

* A Foreign TIN is an identifying number or equivalent issued by the individual's country of tax residency that is used for tax purposes. If you're a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.

Purpose of business relationship (please select one or more options)

This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons for dealing with us. Please indicate **all** your reasons.

	Transactional	Wealth	Correspondent banking
	Savings	Short-term borrowing	Financial markets
	Protection	Long-term borrowing	
Soi	urce of funds (please select one or m	ore options)	
	s refers to the origin of the funds that Itiple sources of funds. Please indicate	are the subject of the business relationship e all your sources of funds.	between you and us. Many customers have
	Salary/wages	Inheritance	Compensation payment
	Commission	Redundancy	Gift/donation
	Bonus	Liquidation of assets	Windfall
	Loan	Government benefits	Tax refund
	Business profits	Superannuation/pension	Insurance payment
	Sale of assets	Investment income/earnings	
	Rental Income	Business income/earnings	
	Additional sources (please specify)		
Soi	urce of wealth (please select one or r	more options)	
	s refers to the origin of your total net a icate all your sources of wealth.	assets/total net worth. Many customers will	have multiple sources of wealth. Please
	Government benefits	□ Windfall	Business income/earnings
	Business profits	Inheritance	Compensation payment

Liquidation of assets

Employment income/earnings

Superannuation/pension

Investment income/earnings

Gift/donation	Gift/donation

U Owns real estate/property

None

_				
	A d ditional		100000	and a sife of
	Additional	sources	IDlease	Specify
_		000.000	(100000	

Rental income

Insurance payment Sale of assets

Redundancy

ull name (as per identification document)			
ther name(s) (if any)			
re you a Bank of Melbourne customer? If yes, then p Your Customer Number can be found on your statem			Date of birth
mployment Type (e.g. Full Time, Part Time, Casual)			
ccupation			
ull address (not a PO Box) treet			
uburb		State	Postcode
lobile number	Email address		
	tside of Australia?		

	Country	Foreign TIN
1		
2		
3		
4		
5		

🗌 No

So to next question

* A Foreign TIN is an identifying number or equivalent issued by the individual's country of tax residency that is used for tax purposes. If you're a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.

Purpose of business relationship (please select one or more options)

This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons for dealing with us. Please indicate **all** your reasons.

Transact	ional	Wealth	Correspondent banking
Savings		Short-term borrowing	Financial markets
Protection	on [Long-term borrowing	
Source of fu	nds (please select one or mo	re options)	
	o the origin of the funds that a rces of funds. Please indicate		between you and us. Many customers have
Salary/w	/ages [Inheritance	Compensation payment
Commiss	sion	Redundancy	Gift/donation
Bonus	[Liquidation of assets	Windfall
🗌 Loan		Government benefits	Tax refund
Business	; profits	Superannuation/pension	Insurance payment
Sale of a	ssets	Investment income/earnings	
Rental Ir	Icome	Business income/earnings	
Addition	al sources (please specify)		
Source of w	ealth (please select one or m	ore options)	
	o the origin of your total net as your sources of wealth.	ssets/total net worth. Many customers will	have multiple sources of wealth. Please
Governn	nent benefits	Windfall	Business income/earnings
Business	profits	Inheritance	Compensation payment

Liquidation of assets

Employment income/earnings

Superannuation/pension

Investment income/earnings

Gift/donation

U Owns real estate/property

	Ν	0	n	е	

Additional sources (please specify)

Rental income

Insurance payment

Redundancy

Sale of assets

3 4 5

No **OB Go to next question**

written in English.

8. Beneficial Owners (continued).			
Beneficial Owner 4			
Full name (as per identification document)			
Other name(s) (if any)			
Are you a Bank of Melbourne customer? If yes, then please pro (Your Customer Number can be found on your statement in Bar			e of birth
Employment Type (e.g. Full Time, Part Time, Casual)			
Occupation			
Full address (not a PO Box) Street			
Suburb		State	Postcode
Mobile number	Email address		
Is Beneficial Owner 4 a tax resident of any country outside of A	Australia?		
Yes Please indicate below the country(ies) in which E and each country's associated Tax Identification			
Country	Foreign TIN		
1			

* A Foreign TIN is an identifying number or equivalent issued by the individual's country of tax residency that is used for tax purposes. If you're a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority

Purpose of business relationship (please select one or more options)

This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons for dealing with us. Please indicate **all** your reasons.

Transactional	Wealth	Correspondent banking
Savings	Short-term borrowing	Financial markets
Protection	Long-term borrowing	
Source of funds (please select one or m	ore options)	
This refers to the origin of the funds that multiple sources of funds. Please indicate		o between you and us. Many customers have
Salary/wages	Inheritance	Compensation payment
Commission	Redundancy	Gift/donation
Bonus	Liquidation of assets	□ Windfall
Loan	Government benefits	Tax refund
Business profits	Superannuation/pension	Insurance payment
Sale of assets	Investment income/earnings	
Rental Income	Business income/earnings	
Additional sources (please specify)		
Source of wealth (please select one or i	more options)	
This refers to the origin of your total net a	assets/total net worth. Many customers wi	ll have multiple sources of wealth. Please
indicate all your sources of wealth.		
Government benefits	Windfall	Business income/earnings
Business profits	Inheritance	Compensation payment
Rental income	Liquidation of assets	Gift/donation
Redundancy	Employment income/earnings	Owns real estate/property
Insurance payment	Superannuation/pension	None
Sale of assets	Investment income/earnings	
Additional sources (please specify)		

8. Beneficial Owners (continued).			
Beneficial Owner 5			
Full name (as per identification document)			
Other name(s) (if any)			
Are you a Bank of Melbourne customer? If yes, then please provid (Your Customer Number can be found on your statement in Bank			Date of birth
Employment Type (e.g. Full Time, Part Time, Casual)			
Occupation			
Full address (not a PO Box) Street			
Suburb		State	Postcode
Mobile number	Email address		
Is Beneficial Owner 5 a tax resident of any country outside of Au	stralia?		
Yes Please indicate below the country(ies) in which Ber and each country's associated Tax Identification Nu Country		Max 5):	oses
1			
2			

No 🜔 Go to next question

4 5

* A Foreign TIN is an identifying number or equivalent issued by the individual's country of tax residency that is used for tax purposes. If you're a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.

Purpose of business relationship (please select one or more options)

This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons for dealing with us. Please indicate **all** your reasons.

	Transactional	Wealth	Correspondent banking
	Savings	Short-term borrowing	Financial markets
	Protection	Long-term borrowing	
Soi	urce of funds (please select one or m	ore options)	
	s refers to the origin of the funds that Itiple sources of funds. Please indicate	are the subject of the business relationship e all your sources of funds.	between you and us. Many customers have
	Salary/wages	Inheritance	Compensation payment
	Commission	Redundancy	Gift/donation
	Bonus	Liquidation of assets	Windfall
	Loan	Government benefits	Tax refund
	Business profits	Superannuation/pension	Insurance payment
	Sale of assets	Investment income/earnings	
	Rental Income	Business income/earnings	
	Additional sources (please specify)		
Soi	urce of wealth (please select one or r	more options)	
	s refers to the origin of your total net a icate all your sources of wealth.	assets/total net worth. Many customers will	have multiple sources of wealth. Please
	Government benefits	□ Windfall	Business income/earnings
	Business profits	Inheritance	Compensation payment

Liquidation of assets

Employment income/earnings

Superannuation/pension

Investment income/earnings

Gift/donation	Gift/donation

U Owns real estate/property

None

_				
	Additional	COURCOC	Inlanca	chocify
	Auditionat	sources	please	specify

Rental income

Insurance payment Sale of assets

Redundancy

9. Foreign Tax Residency statement.

We are required to identify tax residents of a country(ies) other than Australia in order to meet account information reporting requirements under local and international laws.

If at any time after account opening, information in our possession suggests that you, the entity and/or any individual who holds ownership and/or control in the entity of 25% or more (Beneficial Owner/Controlling Person) may be a tax resident of a country(ies) other than Australia, you may be contacted to provide further information on your foreign tax status and/or the foreign tax status of the entity and/or any Beneficial Owners/Controlling Persons. Failure to respond may lead to certain reporting requirements applying to the account.

You certify that if at any time there is a change to the foreign tax status details for you, the entity and/or any controlling persons, you will inform the bank. You also certify that if at any time there is a change of a controlling person/s in your entity, you will inform the bank.

A Beneficial Owner/Controlling Person refers to the individual(s) that directly or indirectly owns a legal interest in the entity of 25% or more and/or exercises actual effective control over the entity, whether from an economic or other perspective such as through voting rights. In addition, in the case of a trust, a Beneficial Owner/Controlling Person includes the settlor(s), trustee(s), appointer(s), protector(s), beneficiary(ies) or classes of beneficiaries and in the case of an entity other than a trust, the term includes persons in equivalent or similar positions.

10. Privacy statement and consent request.

Privacy Statement.

All personal information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at <u>bankofmelbourne.com.au/privacy/privacy-statement</u> or by calling us on **13 22 66**. Our Privacy Statement also provides information about how you can access and correct your personal information and make a complaint. You do not have to provide us with any personal information, but if you don't, we may not be able to continue to provide products or services to the customer for which you are a trustee, partner, representative, beneficial owner, or controlling person.

Consent Request.

You consent to Bank of Melbourne collecting and holding any sensitive information (such as health information or information about your racial or ethnic origin) which appears on certified copies of your identity documents. You will not be able to withdraw your consent to Bank of Melbourne holding this information after it has been provided because Bank of Melbourne is required to retain copies of identification documents under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*.

If you do not consent to Bank of Melbourne's collection of any such sensitive information, you may verify your identity in person at any Bank of Melbourne branch.

11. Declaration.

Customer declaration.

I acknowledge and declare that to the best of my knowledge, the information I have provided above is true and correct as at the date of this document. I have been duly appointed by the entity and authorised to sign for and on behalf of the entity. I understand that it is an offence to knowingly give false or misleading information or knowingly produce a false or misleading document under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*. I confirm that there have not been any changes or amendments to the certified document on and from the date on which it was certified.

Where I am providing personal information about another individual, I have made them aware:

- that I will be doing this; and
- that Bank of Melbourne will collect, use and share their personal information in accordance with its Privacy Statement available at bankofmelbourne.com.au/privacy/privacy-statement

Where I am providing Bank of Melbourne with another person's sensitive information, I have obtained their consent to sharing it with Bank of Melbourne and their consent to Bank of Melbourne collecting, using and disclosing their sensitive information in accordance with Bank of Melbourne's Privacy Statement.

Signature of authorised person	Position held (Chairperson/President or Equivalent))
X	
Entity name	Date of signature
	/ /
Full name (given name/s and family name)	Customer Number (if applicable)
Are you also a Beneficial Owner and have provided your details	s in Section 8?
Yes	
No O Please continue completing Signatory details que	estions below
Full name (as per identification document)	
Other names (if any)	Date of birth
Employment Type (e.g. Full Time, Part Time, Casual)	
Occupation	
Full residential address (not a PO Box)	
Street	
Suburb	State Postcode
Email address	Mobile number
	·

11. Declaration (continued).

Are you a tax resident of any country outside of Australia?					
		e a resident for tax purposes and each country's			
	fication Number (TIN)* (Min 1 – N				
Country		Foreign TIN			
1					
2					
3					
4					
5					
No O Go to next question					
		ry of tax residency that is used for tax purposes. If you're a tax resident e (which could include publicly available information) from an official			
Purpose of business relationship (please select one or more optio	ns)			
		and services. Customers may have multiple reasons for			
dealing with us. Please indicate all	your reasons.	_			
Transactional	Wealth	Correspondent banking			
Savings	Short-term borrowing	Financial markets			
Protection Long-term borrowing					
Source of funds (please select one	or more options)				
-		ess relationship between you and us. Many customers			
have multiple sources of funds. Plea					
Salary/wages	lnheritance	Compensation payment			
	Redundancy	Gift/donation			
Bonus	Liquidation of assets	└── Windfall			
L Loan	Government benefits	Tax refund			
Business profits	Superannuation/pensi				
Sale of assets	Investment income/ea	-			
Rental Income	Business income/earni	ngs			
Additional sources (please spec	ify)				

11. Declaration (continued).

Source of wealth (please select one or more options)		
This refers to the origin of your total net assets/total net worth. Many customers will have multiple sources of wealth. Please		
indicate all your sources of wealth.		
Government benefits	Windfall	Business income/earnings
Business profits	Inheritance	Compensation payment
Rental income	Liquidation of assets	Gift/donation
Redundancy	Employment income/earnings	Owns real estate/property
Insurance payment	Superannuation/pension	None
Sale of assets	Investment income/earnings	
Additional sources (please specify)		

Bank use only

Please contact the Business Identification Team on 1800 100 238 (WBC) between 9am – 5pm AEST Mon – Fri.

The team will be able to assist customers with completing the form.

Kindly check all sections of the form are completed and signed. Please check all required documents are certified correctly.

Send completed form and certified identification to <u>businessIDBOM@bankofmelbourne.com.au</u> after completing the Employee Declaration.

Employee Declaration:

I have followed the process for identification and verification as required by policy and procedure and have verified the required information provided by the customer using approved verification source(s). Where the verification source has been provided by the customer the document is to the best of my knowledge a certified copy.

Employee name (print)

Employee salary number

Employee signature

Date

/ /

X