|  |  |
| --- | --- |
| ACN 079 220 901admin@banksiacorporate.com.au [www.banksiacorporate.com.au](http://www.banksiacorporate.com.au) Phone (03) 9734 6780**Order Form – DISCRETIONARY TRUST BAMFORD AMENDMENTS – 2025/26** |  |

# Your Details

|  |  |
| --- | --- |
| Your Firm |        |
| Your Name |       |
| Delivery Address |       |
| Date |       |
| Phone Number |       |
| Email Address |       |
|  |  |
| Option 1 – Deed in Triplicate (Hardcopy) POA Y/N? |       |
| Option 2 – Electronic Deed Only POA Y/N? |       |
| Additional Deed (Hard Copy) $22 Y/N? |       |
| Additional Deed (Soft Copy) $22 Y/N?  |       |

# Trust Details

|  |  |
| --- | --- |
| Name of Trust |        |
| Date of Original Deed |       |
| Dates of any Variations Since Establishment |       |
| Effective Date of This New Document |       |
| Clause in Deed Allowing Variations |       |
| Laws of Which State/Territory Apply to This Document? |       |
| Settlor’s Name |       |
| Settlor’s Address |       |

#

# Trustees

|  |  |
| --- | --- |
| Full Name |       |
| A.C.N. (if applicable) |       |
| Full Address |       |
| Signatory’s Name for Minutes |       |

| **Full Name** |       |
| --- | --- |
| **A.C.N. (if applicable)**  |        |
| **Full Address** |       |
| **Signatory’s Name for Minutes** |       |

# Appointors

|  |  |
| --- | --- |
| **Full Name** |       |
| **Full Address**  |       |
|  |       |
| **Full Name** |       |
| **Full Address**  |       |
|  |
|  Guardians |
| **Full Name** |       |
| **Full Address** |       |
|  |       |
| **Full Name** |       |
| **Full Address**  |       |
|  |
| Credit Card Payment |
| **Cardholder’s Name** |       |
| **Credit Card No.** |       |
| **Expiry Date** |       |
| **Amount** |       |
| **Cardholder’s Signature** |       |