



CHECKLIST

Trust Application

Information required to open a Smarter Money Account

Fund Name: Smarter Money Fund Smarter Money Higher Income Fund Long-Short Credit Fund

Primary Contact Details	
Full Name	
Email	
Postal Address	
Mobile Phone	
Mailing Preference	<input type="checkbox"/> Email <input type="checkbox"/> Paper Send to <input type="checkbox"/> Investor <input type="checkbox"/> Adviser <input type="checkbox"/> Both
Trust Details	
Trust Name	
ABN/ACN	
TFN	
Trustee/Director of Corporate Trustee Details	
Director 1 - Full Name	
DOB	
Residential Address	
Director 2 (if applicable) - Full Name	
DOB	
Residential Address	
Beneficiaries (if applicable) - Full Name	
Corporate Trustee Details (if applicable)	
Trustee Name	
ABN/ACN	
Investment Details	
Investment Amount	\$
Distributions	<input type="checkbox"/> Reinvested <input type="checkbox"/> Paid out
Operating Authority	<input type="checkbox"/> Any one to sign <input type="checkbox"/> Both to sign
Bank Account Details	
Bank Name	
Branch Name	
BSB	
Account Number	
Account Name (must be same as investor)	