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VIC/TAS WA

PO Box 377 Hawthorn VIC 3122 PO Box 57 Burswood WA 6100

FUNDS LODGEMENT FORM

Account Name:			
Client Account No:			_ #
Amount \$			
Date:			
I/We acknowledge having read, understood and accept the terms and conditions applying to the lodgment of funds as set out in our 'Product Information Statement – Offer Document' and 'Financial Services Guide and Product Disclosure Statement – BFS Non Cash Payment Products'.			
Signature of Lodging Party:			
Lodging Party phone No (If not account owner):			
Special Instructions:			
	Office use:		
	Entered by:	Date :/	/