



This form must be completed if the Partnership named below is a Partner in another Partnership, a Beneficial Owner of a Company or a Trustee of a Trust.

SECTION 1. PARTNERSHIP DETAILS

Partnership Name COMPULSORY

Country of Establishment COMPULSORY

Country of Primary Place of Business COMPULSORY

Is the Partnership a Limited Partnership No Yes – please complete section 4

Does the Partnership have a Deed or Agreement? No Yes – please supply a certified copy

Registered Address

Postal Address

Is the Partnership named above a Financial Institution? No Yes

Please refer to the "Financial Institution Worksheet" on the "Download Forms" page on the ANZ Securities website.

SECTION 2. PARTNERS

List all Partners below and complete Section 3 or download the appropriate supplement for each Partner. Please make extra copies of this page and attach them to your application if there are more than four Partners.

Name of Partner

- If the Partner is an individual, complete Section 3.
- If the Partner is an Entity, download and complete the appropriate supplement form from the "Download Forms" page on the ANZ Securities website.

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3. ASSOCIATED INDIVIDUALS

Complete Section 3 for any Partners who are individuals. Please make extra copies of this page and attach them to your application if there are more than four Partners.

FIRST INDIVIDUAL

Title	Full legal name		
Date of Birth	COMPULSORY	Country of Birth	COMPULSORY
Contact Phone		Email	
Residential address	COMPULSORY		
Occupation	COMPULSORY		
Is the associated individual a US resident for tax purposes?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website
Is the associated individual a US citizen?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website

SECOND INDIVIDUAL

Title	Full legal name		
Date of Birth	COMPULSORY	Country of Birth	COMPULSORY
Contact Phone		Email	
Residential address	COMPULSORY		
Occupation	COMPULSORY		
Is the associated individual a US resident for tax purposes?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website
Is the associated individual a US citizen?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website

THIRD INDIVIDUAL

Title	Full legal name		
Date of Birth	COMPULSORY	Country of Birth	COMPULSORY
Contact Phone		Email	
Residential address	COMPULSORY		
Occupation	COMPULSORY		
Is the associated individual a US resident for tax purposes?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website
Is the associated individual a US citizen?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website

FOURTH INDIVIDUAL

Title	Full legal name		
Date of Birth	COMPULSORY	Country of Birth	COMPULSORY
Contact Phone		Email	
Residential address	COMPULSORY		
Occupation	COMPULSORY		
Is the associated individual a US resident for tax purposes?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website
Is the associated individual a US citizen?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website

SECTION 4. Financial Details

Source of Funds:

Please provide a description and evidence of what has generated the total net worth of the Limited Partnership and / or where the funds have originated from. We have provided examples in the following table:

Source of Funds	Suggested Verification / Evidence
Employment	Copy of pay slip (or bonus) from within last three months Bank statement details IRD Documents
Business Proceeds	Copy of latest audited accounts Letter from solicitor/accountant
Disposal of Business or Assets	Copy of latest audited accounts Letter from solicitor/accountant
Investment Income	Copy of investment / savings certificates, contract notes, or surrender statements Bank statement clearly showing receipt of funds and investment source Letter from solicitor/accountant
Superannuation lump sum or annuity / retirement plan payments	Copy of closing statement Letter confirming collection
Insurance / compensation claim	Copy of closing statement Letter confirming claim
Lottery / Betting Win	Lotteries Commission
Inheritance	Grant of Probate (copy of the will) which must include the value of estate Letter from solicitor/accountant
Gift	Donor's source of wealth – requirements of evidence as stated above for each individual source of wealth and a letter from the donor confirming details of the gift. Letter from solicitor/accountant
Maturity or surrender of life policy	Copy of closing statement Letter confirming surrender
Sale of property	Copy of sale contract Letter from solicitor/accountant

Turn to the next page for a list of the required documentation that must accompany this supplement form.

4. FINAL CHECKLIST

- A clear and certified or verified copy of the Partnership Agreement or Deed, if there is one
- A clear and certified or verified copy of photo identification for all Individuals who are named in Section 3
- An original, or a clear and certified or verified copy, of proof of the residential address for all Individuals who are named in Section 3
- A clear and certified or verified copy of the Source of Funds for the Limited Partnership (if applicable).
- Attach this supplement form to your Company/Trust/Partnership application form.