

BlackRock Investment Management (Australia) Limited ABN 13 006 165 975
AFSL Licence Number 230523 (referred to as **BlackRock**)

Important information

BlackRock must comply with the Anti-Money Laundering and Counter-Terrorism Financing laws (the **AML Legislation**), which requires us to, among other things, establish your identity. This Investor Identification Form is used to collect the necessary information to fulfil this requirement. For your application to be processed by BlackRock, you must ensure that this form and your Fund Application Form are completed and returned to us. By completing the Investor Identification Form you acknowledge and agree:

- ▶ this information will be used by BlackRock to establish your identity for the purposes of the AML Legislation; and
- ▶ BlackRock will not be responsible or liable to you, or any other person, for any loss suffered where a transaction is delayed, blocked, frozen or where BlackRock declines to process a transaction or ceases to provide you with a product or service, in circumstances where BlackRock is unable to establish your identity or where BlackRock reasonably believes you are a Proscribed Person.¹

When completing this form

Depending on your investor type, BlackRock may require supporting identification/verification documentation to establish your identity. Where such identification/verification documentation is required, an originally certified copy is required. A list of persons who can certify documents is provided on the next page.

Will documents in a language other than English be accepted?

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (**NAATI**) at the level of Professional Translator or above.

Which sections of this form apply to me?

Please ensure that you read the section applicable to you and (where relevant) attach an originally certified copy of the document before sending it to BlackRock.

What type of investor am I?

Type of investor	Description
Foreign Company	Company incorporated in a foreign jurisdiction.
Foreign Government Body	A Foreign Government Body is a legal entity or emanation established in a foreign jurisdiction.
Foreign Company acting as a Corporate Trustee(s) of a Trust	Company incorporated in a foreign jurisdiction, acting in the capacity of a trustee on behalf of another. A trust will in most circumstances be established pursuant to a trust deed with the intention of holding income or property on behalf and for the benefit of another (who may or may not include the trustee). Trusts can include: <ul style="list-style-type: none"> ▶ Family trusts; ▶ Deceased estate; ▶ Managed investment scheme (registered or unregistered); ▶ Charitable trust; ▶ Testamentary trust; and ▶ Pension scheme/Retirement fund.
Beneficial Owner	A beneficial owner of a customer is an individual (a natural person or persons) who ultimately owns or controls (directly or indirectly) the customer.

If you are **NOT** a Foreign Company, Foreign Company acting as a Corporate Trustee(s) of a Trust or a Foreign Government Body you will need to complete a separate Investor Identification Form, available from our website at www.blackrock.com.au, which caters to the following types of investors:

- ▶ Individual(s) & Sole Traders
- ▶ Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund Domestic (Australian) Company
- ▶ Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund Partnership
- ▶ Association
- ▶ Registered Co-operative
- ▶ Government Body (Australian)

1. A "Proscribed Person" means any person or entity who BlackRock reasonably believes to be (i) in breach of the laws of any jurisdiction regarding economic or trade sanctions, or laws prohibiting money laundering or terrorism financing, or (ii) on a list of persons with whom dealings are proscribed by Australian laws or the laws of another recognised jurisdiction. A "Proscribed Person" includes any person or entity who BlackRock reasonably believes to act on behalf, or for the benefit of, a person or entity referred to in (i) and/or (ii).

Certifying documents

An originally certified document is a copy of an original document that has been certified as a true copy of the original document.

To obtain an originally certified copy, present the original document and a photocopy of that document to one of the people listed below. The person certifying the document must include the following statement:

I certify that this is a true copy of the original document produced to me on [insert date, month and year].

[Signature of certifier]

[Full name of certifier] [Occupation, qualification or registration number (if any) of the certifier, which makes them eligible to certify documents]

If this certification does not appear, you may be asked for new certified documents.

Please note that certification must be in original wet ink and cannot be provided by a family member.

The certification must be dated within the last 12 months.

Who can certify documents? (In Australia)

OCCUPATIONS

A person who, under a law in force in a State or Territory, is currently licensed or registered to practice in the following occupations:

- ▶ Chiropractor
- ▶ Dentist
- ▶ Legal practitioner
- ▶ Medical practitioner
- ▶ Nurse
- ▶ Optometrist
- ▶ Patent attorney
- ▶ Pharmacist
- ▶ Physiotherapist
- ▶ Psychologist
- ▶ Trade marks attorney
- ▶ Veterinary surgeon

OTHER PERSONS

- ▶ Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- ▶ Chief executive officer of a Commonwealth Court
- ▶ Finance company officer with 2 or more years of continuous service
- ▶ Judge of a court Justice of the Peace Magistrate
- ▶ Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the Marriage Act 1961
- ▶ Member of the Australian Defence Force who is:
 - an officer; or
 - a non-commissioned officer within the meaning of the Defence Force Discipline Act 1982 with 2 or more years of continuous service; or
 - a warrant officer within the meaning of that Act.
- ▶ Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants

- ▶ Minister of religion registered under Subdivision A of Division 1 of Part IV of the Marriage Act 1961
- ▶ Notary public
- ▶ Permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- ▶ Permanent employee of:
 - the Commonwealth or a Commonwealth authority; or
 - a State or Territory or a State or Territory authority; or
 - a local government authority,with 2 or more years of continuous service who is not otherwise specified in this list
- ▶ Police officer
- ▶ Registrar, or Deputy Registrar, of a court
- ▶ Teacher employed on a full-time basis at a school or tertiary education institution
- ▶ A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)
- ▶ An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more years of continuous service with one or more licensees

Who can certify documents? (Outside Australia)

Any Australian recognised individual from the above list of Australian “listed persons” or the following:

- ▶ Notary public (authorised in Australia or in a foreign country)
- ▶ Employee of the Australian Trade Commission who is:
 - in a country or place outside Australia; and
 - authorised under paragraph 3(d) of the Consular Fees Act 1955; and
 - exercising his or her function in that place
- ▶ Employee of the Commonwealth who is:
 - in a country or place outside Australia; and
 - authorised under paragraph 3(c) of the Consular Fees Act 1955; and
 - exercising his or her function in that place
- ▶ Registered Legal practitioner (in equivalent jurisdiction)
- ▶ Chartered Accountant (in equivalent jurisdiction)
- ▶ Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955)

Foreign language documents

Where the documents are provided in a language other than English they must be translated in their entirety by a professional body e.g. lawyer, legal translator or a BlackRock employee.

All translated documents must be certified by the translator. The translator must include the following statement on the translation:

I certify that this is a true and accurate translation of the original document.

[Signature of translator]

[The date of the translation]

[Full name of translator] [Contact details of the translator or a representative of the translation company]

Section A. Foreign Company

If you are:

- ▶ a Company incorporated in a foreign jurisdiction, complete this Section A; or
- ▶ a Company incorporated in a foreign jurisdiction, acting in the capacity of a trustee of a trust, **proceed to Section B.**

Section A1: General information

Full name of foreign company	
Country of formation/incorporation/registration	
<input type="checkbox"/>	Select (✓) if f registered by a foreign body and provide the name of the body:

Section A2: Is the foreign company registered with ASIC?

<input type="checkbox"/> Yes <table border="1" style="display: inline-table; border-collapse: collapse; margin: 0 5px;"> <tr><td style="width: 20px; height: 15px;"></td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse; margin: 0 5px;"> <tr><td style="width: 20px; height: 15px;"></td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse; margin: 0 5px;"> <tr><td style="width: 20px; height: 15px;"></td></tr> </table> <table border="1" style="display: inline-table; border-collapse: collapse; margin: 0 5px;"> <tr><td style="width: 20px; height: 15px;"></td></tr> </table> Provide Australian Registered Body Number (ARBN)					<input type="checkbox"/> No Provide company identification number (if any) issued by the foreign registration body
Provide EITHER <input type="checkbox"/> Address of principal place of business in Australia					
OR <input type="checkbox"/> Local agent name and address details					

Address

Street address
Suburb
State Postcode
Country (if not Australia)

Name of local agent in Australia

Principal place of business in the company's country of formation or incorporation

Street address
Suburb
State Postcode
Country (if not Australia)

Section A3: Registered address of company

Provide the registered address as registered with ASIC. If the foreign company is **NOT** registered with ASIC, provide the registered address in the country of formation, incorporation or registration (if any)

Street address
Suburb
State Postcode
Country (if not Australia)

Section A4: Regulatory/listing details

Please select (✓) each of the following categories that apply to the company and provide the information requested.

<input type="checkbox"/> Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator)	Regulator name	<div style="border: 1px solid black; height: 15px;"></div>
	Licence details	<div style="border: 1px solid black; height: 15px;"></div>
<input type="checkbox"/> Listed as defined in the IFSA/FPA Guidelines	Name of market/exchange	<div style="border: 1px solid black; height: 15px;"></div>
	Australian listed company name	<div style="border: 1px solid black; height: 15px;"></div>
<input type="checkbox"/> Majority-owned subsidiary of an Australian listed company	Name of market/exchange	<div style="border: 1px solid black; height: 15px;"></div>
<input type="checkbox"/> None of the above		

Section A5: Company type

Please select (✓) one of the following.

Public listed company (company name does NOT end with Proprietary Ltd or Pty Ltd; generally listed companies)

Private/proprietary (company name ends with Proprietary Ltd or Pty Ltd; also known as private companies)

Other

Section A6: Directors

Complete for all companies other than listed companies (as ticked in Section A4) or public companies (as ticked in Section A5)

How many directors are there: Provide the below details for **ALL** directors.

1st Director

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

Suburb

State Postcode

Country (if not Australia)

2nd Director

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

Suburb

State Postcode

Country (if not Australia)

3rd Director

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

Suburb

State Postcode

Country (if not Australia)

4th Director

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

Suburb

State Postcode

Country (if not Australia)

If there are more than four directors, provide details on a separate sheet and attach to this form.

If the company is a regulated company (as selected in Section A4 above), this is the end of Section A. Please submit this form, together with your application form. Otherwise, proceed to Section A7.

Section A7: Shareholders

Complete for all companies other than (i) listed or regulated companies (as ticked in Section A4) or (ii) public companies (as ticked in Section A5).
Provide details of **ALL** individuals who are beneficial owners through one or more shareholdings of more than 25% of the company's issued capital.

Shareholder 1

Full given name(s)
Surname
/ /
Date of birth (dd/mm/yyyy)

Residential address details: PO Box is NOT acceptable	
Street address	
Suburb	
State	Postcode
Country (if not Australia)	

Shareholder 2

Full given name(s)
Surname
/ /
Date of birth (dd/mm/yyyy)

Residential address details: PO Box is NOT acceptable	
Street address	
Suburb	
State	Postcode
Country (if not Australia)	

Shareholder 3

Full given name(s)
Surname
/ /
Date of birth (dd/mm/yyyy)

Residential address details: PO Box is NOT acceptable	
Street address	
Suburb	
State	Postcode
Country (if not Australia)	

This is the end of Section A. Please submit this form together with the completed Fund Application Form.

Verification procedure

BlackRock will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information.

Section B. Foreign company acting as trustee of a trust

If you are:

- ▶ a Company incorporated in a foreign jurisdiction **AND** you are acting in the capacity of a trustee of a trust, complete this Section B; or
- ▶ a Company incorporated in a foreign jurisdiction that is not acting in the capacity of a trustee of a trust, please complete Section A only.

Section B1: Trust details

Full name of trust

Full business name (if any)

Country where trust established

Section B2: Type of trust

Select **ONE** of the following options and provide the requested information (if applicable).

<input type="checkbox"/>	Regulated trust	Regulator name	<input type="text"/>
		Trust ABN or registration/licensing details	<input type="text"/>

If you have ticked regulated trust, Sections B3 and B4 do **NOT** need to be completed. **Proceed to Section B5.**

<input type="checkbox"/>	Government superannuation fund	Name of legislation establishing the fund	<input type="text"/>
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If you have ticked government superannuation fund, Sections B3 and B4 do **NOT** need to be completed. **Proceed to Section B5.**

<input type="checkbox"/>	Registered managed investment scheme	Registered Scheme Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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If you have ticked registered managed investment scheme, Sections B3 and B4 do **NOT** need to be completed. **Proceed to Section B5.**

<input type="checkbox"/>	Other trust type (e.g. Self-Managed Superannuation Fund/Pension Scheme/Retirement Fund)	Trust description (e.g. family discretionary or unit trust, testamentary trust, charitable, estate, SMSF, pension scheme, retirement fund)	<input type="text"/>
		Trust ABN or registration/licensing details	<input type="text"/>

If you have ticked other trust type, **please complete Sections B3 and B4, then proceed to Section B5.**

Section B3: Beneficiary details

Provide beneficiary details only if "Other trust type" is selected in Section B2 above.

Do **NOT** complete if the trust is a regulated trust, government superannuation fund or a registered managed investment scheme.

Do the terms of the trust identify the beneficiaries by reference to membership of a class?

Yes Provide details of the membership class(es) (e.g. unit holders, family members of a named person, charitable purpose)

Proceed to Section B4

No How many beneficiaries are there? Provide details of each beneficiary below.

--

Beneficiary 1

--

Full given name(s)

--

Surname

	/		/	
--	---	--	---	--

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

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Suburb

State	Postcode
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Country (if not Australia)

Beneficiary 2

--

Full given name(s)

--

Surname

	/		/	
--	---	--	---	--

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

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Suburb

State	Postcode
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Country (if not Australia)

Beneficiary 3

--

Full given name(s)

--

Surname

	/		/	
--	---	--	---	--

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

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Suburb

State	Postcode
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Country (if not Australia)

Beneficiary 4

--

Full given name(s)

--

Surname

	/		/	
--	---	--	---	--

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

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Suburb

State	Postcode
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Country (if not Australia)

If there are more beneficiaries, provide details on a separate sheet and attach to this form.

Proceed to Section B4

Section B4: Trustee details

Provide trustee details only if "Other trust type" is selected in Section B2 above.

Do **NOT** complete if the trust is a regulated trust, government superannuation fund or a registered managed investment scheme.

How many trustees are there? Provide full name and address of each trustee below.

Trustee 1

Company name OR full name if the Trustee is an individual

Company registered office address OR residential address if the Trustee is an individual : PO Box is **NOT** acceptable

Street address	
<input type="text"/>	
Suburb	
State	Postcode
Country (if not Australia)	

Trustee 2

Company name OR full name if the Trustee is an individual

Company registered office address OR residential address if the Trustee is an individual : PO Box is **NOT** acceptable

Street address	
<input type="text"/>	
Suburb	
State	Postcode
Country (if not Australia)	

If there are more trustees, please provide details on a separate sheet and attach to this form.

Proceed to Section B5.

Section B5: Foreign company details – general information only

Note: Sections B5 to B11 needs to be completed for ONLY ONE of the Trustees (that is a foreign company) of the Trust.

Full name of foreign company

Country of formation/incorporation/registration

Select if registered by a foreign body and provide the name of the body

Section B6: Is the foreign company registered with ASIC?

Yes
 Provide Australian Registered Body Number (ARBN)

No
 Provide company identification number (if any) issued by the foreign registration body

Provide EITHER Address of principal place of business in Australia
 OR Local agent name and address details

Address

Street address	
<input type="text"/>	
Suburb	
State	Postcode
Country (if not Australia)	

Principal place of business in the company's country of formation or incorporation

Street address	
<input type="text"/>	
Suburb	
State	Postcode
Country (if not Australia)	

Name of local agent in Australia

Section B7: Control over Trust

Does anyone else have a substantial control over the trust (e.g. an appointer or individual or company with the power to appoint, remove or instruct trustees).

Yes Provide the below details for ALL controlling persons.

No No further information is required.

1st Controlling person

Full Given name(s) or company name

Surname

Date of birth (dd/mm/yyyy)

Residential address details if an individual trustee **OR** company registered office address: PO Box is **NOT** acceptable

Street address	
<input type="text"/>	
Suburb	
<input type="text"/>	
State	Postcode
<input type="text"/>	<input type="text"/>
Country (if not Australia)	
<input type="text"/>	

2nd Controlling person

Full Given name(s) or company name

Surname

Date of birth (dd/mm/yyyy)

Residential address details if an individual trustee **OR** company registered office address: PO Box is **NOT** acceptable

Street address	
<input type="text"/>	
Suburb	
<input type="text"/>	
State	Postcode
<input type="text"/>	<input type="text"/>
Country (if not Australia)	
<input type="text"/>	

If there are more than two controlling persons, provide details on a separate sheet and attach to this form.

Section B8: Registered address of company

Provide the registered address as registered with ASIC. If the foreign company is **NOT** registered with ASIC, provide the registered address in the country of formation, incorporation or registration (if any)

Street address	
<input type="text"/>	
Suburb	
<input type="text"/>	
State	Postcode
<input type="text"/>	<input type="text"/>
Country (if not Australia)	
<input type="text"/>	

Section B9: Regulatory/listing details

Please select (✓) each of the following categories that apply to the company and provide the information requested.

Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator)

Regulator name

Licence details

Listed as defined in the IFSA/FPA Guidelines

Name of market/exchange

Majority-owned subsidiary of an Australian listed company

Australian listed company name

Name of market/exchange

None of the above

Section B10: Company type

Please select (✓) **ONE** of the following:

Public

This form is now complete. Please submit this form, together with the completed application form. If "Other trust type" is selected in Section B2, you will need to provide us with the documents requested at the end of Section B.

Private/Proprietary Proceed to Section B11.

Other Proceed to Section B11.

Section B11: Directors

Complete for all companies other than listed companies (as ticked in Section B9) or public companies (as ticked in Section B10)

How many directors are there: Provide the below details for **ALL** directors.

1st Director

Full given name(s)

Surname

/ /

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

Suburb

State Postcode

Country (if not Australia)

2nd Director

Full given name(s)

Surname

/ /

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

Suburb

State Postcode

Country (if not Australia)

3rd Director

Full given name(s)

Surname

/ /

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

Suburb

State Postcode

Country (if not Australia)

4th Director

Full given name(s)

Surname

/ /

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address

Suburb

State Postcode

Country (if not Australia)

If there are more than four directors, provide details on a separate sheet and attach to this form.

If the company is a regulated company (as selected in Section B9 above), this is the end of Section B. Please submit this form, together with your application form. If "Other trust type" is selected in Section B2, you will also need to provide us with the documents requested at the end of Section B..

Otherwise, proceed to Section B12.

Section B12: Shareholders

Complete for all companies other than (i) listed or regulated companies (as ticked in Section B9) or (ii) public companies (as ticked in Section B10).
Provide details of **ALL** individuals who are beneficial owners through one or more shareholdings of more than 25% of the company's issued capital.

Shareholder 1

<input type="text"/>
Full given name(s)
<input type="text"/>
Surname
<input type="text"/>
Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address	
<input type="text"/>	
Suburb	
<input type="text"/>	
State	Postcode
<input type="text"/>	<input type="text"/>
Country (if not Australia)	
<input type="text"/>	

Shareholder 2

<input type="text"/>
Full given name(s)
<input type="text"/>
Surname
<input type="text"/>
Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address	
<input type="text"/>	
Suburb	
<input type="text"/>	
State	Postcode
<input type="text"/>	<input type="text"/>
Country (if not Australia)	
<input type="text"/>	

Shareholder 3

<input type="text"/>
Full given name(s)
<input type="text"/>
Surname
<input type="text"/>
Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address	
<input type="text"/>	
Suburb	
<input type="text"/>	
State	Postcode
<input type="text"/>	<input type="text"/>
Country (if not Australia)	
<input type="text"/>	

Verification procedure

BlackRock will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information.

If "Other trust type" is selected in Section B2, you will need to provide us with **ONE** of the following please select (✓):

- A notice issued by the applicable Taxation Office within the last 12 months. Block out the TFN before scanning, copying or storing this document.
- A letter from a solicitor or qualified accountant that confirms the name of the trust.
- An original or certified copy or certified extract of the trust deed.

This is the end of Section B. Please submit this form together with the completed Fund Application Form. If "Other trust type" is selected in Section B2, you will need to provide us with the above requested documents.

Section C. Foreign government body

Section C1: General information

Full name of government body

Principal place of operations: PO Box is **NOT** acceptable

Street address	
Suburb	
State	Postcode
Country (if not Australia)	

Proceed to Section C2.

Section C2: Beneficial owners or control over government body

Provide details of ALL individuals who are beneficial owners of, or are controlling persons or have control of a government body.

1st Beneficial owner/controlling person

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address	
Suburb	
State	Postcode
Country (if not Australia)	

2nd Beneficial owner/controlling person

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address	
Suburb	
State	Postcode
Country (if not Australia)	

3rd Beneficial owner/controlling person

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address	
Suburb	
State	Postcode
Country (if not Australia)	

4th Beneficial owner/controlling person

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Residential address details: PO Box is **NOT** acceptable

Street address	
Suburb	
State	Postcode
Country (if not Australia)	

If there are more than four beneficiaries, provide details on a separate sheet and attach to this form.

Verification procedure

BlackRock will perform the Government Body verification procedure. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information.

This is the end of Section C. Please submit this form together with the completed Fund Application Form.