# **Application and Identification Form: Individual(s)**





# 1. Your details

We communicate with the first named investor.	details below.		
Investor 1	Investor 2		
Title	Title		
Cive remarks)	Circum arresta)		
Give name(s)	Given name(s)		
Surname	Surname		
Date of birth	Date of birth		
DD / MM / YYYY	DD / MM / YYYY		
Usual occupation	Usual occupation		
Residential address	Residential address		
Phone number – business hours	Phone number – business hours		
( )	( )		
Phone number – after hours	Phone number – after hours		
( )	( )		
Mobile	Mobile		
Email	Email		
2. How much are you investing?			
Minimum investment: \$500,000 (Special arrangements may be possible in certain circumstances for smaller amounts.)			
\$			
Unless you check the box, distributions are reinvest	ed: Do not reinvest distributions		

Funds are to be paid into the following bank account no later than the fourth last business day of the month

Account Name: Conscious Capital Limited atf The Conscious Investor Fund

BSB: **012 - 006** Account No: **8361 - 88699** 

Please reference your name on the funds transfer.

**OR, if paying by cheque, make cheques payable to:** *Conscious Capital Limited atf the Conscious Investor Fund.* Please cross "Not negotiable".

#### 3. Your identification documents

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 **for each individual applicant.** 

Gr	oup 1
Pro	ovide a certified copy of one of these:
	Australian driver's licence
	showing your photo, and please copy the front and back <b>OR</b>
	Foreign driver's licence
	showing your date of birth, signature and photo <b>OR</b>
	Australian passport
	a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you <b>OR</b>
	Foreign passport
	showing your signature and photo, and please copy the pages which identify you <b>OR</b>
	Australian State or Territory Government issued ID card
	showing your date of birth, signature and photo <b>OR</b>
	Foreign Government issued ID card
	showing your date of birth, signature and photo.
Gr	oup 2
If y	ou can't provide anything from Group 1, then provide a certified copy of one of the following:
	Australian or foreign government issued birth certificate OR
	Australian or foreign government issued citizenship certificate OR
	Centrelink pension or Health card please copy the front and back
PLI	US provide a certified copy of one of the following:
	a Government issued notice
	showing your photo, and please copy the front and back <b>OR</b>
	a rates or utilities notice
	One which shows your name and residential address, not more than 3 months old <b>OR</b>
	ATO notice
	One which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

**Certification:** To verify your identity, these document can be certified by a Justice of the Peace, Doctor, Dentist, Lawyer, Physiotherapist, Pharmacist, Police Officer, Teacher, Accountant, Financial Adviser or Australia Post Officer.

### 4. Your banking details

Account name

We are only permitted to pay redemption or distribution proceeds into a bank account in the name of the applicant. Also redemptions cannot be paid via cheque or in cash.

**Financial Institution** 

BSB	Account number
5. Tax file number (TFN)	
·	ople do since if you choose not to and do not have an exemption, plus the Medicare levy, before paying any distribution to you.
Investor 1 TFN	Investor 2 TFN
OR Exemption code	OR Exemption code

## 6. Signatures

By signing this form, you (the applicant) are telling us:

- You have read and understood the current Information Memorandum,
- You agree to be bound by the constitution of the Fund and the Information Memorandum, as supplemented, replaced or re-issued from time to time
- all details in this Application are true and correct;
- you are over 18 years of age;
- if this Application is signed under Power of Attorney, the Attorney declares that he/she has not received notice of revocation of that power. An original certified copy of the Power of Attorney should be submitted with this Application;
- you acknowledge that no guarantee is made either as to the return of capital or the investment performance
  of the Conscious Investor® Fund and understand that I may lose capital depending on movements in world
  financial markets;
- your information will be collected and used in accordance with Privacy Policy of the Conscious Investor® Fund;
- you am not aware and have no reason to suspect that the moneys used to fund our investment have been or
  will be derived from or related to any money laundering, terrorism financing or similar illegal activities, that I
  will continue to comply with Australian anti-money laundering and counter-terrorism financing laws, and
  declare that I am not a 'politically exposed' person or organization under these laws;
- you will provide Conscious Capital Ltd with any additional information requested in order for this Application to comply with any laws and regulations of Australia;
- Conscious Capital Ltd may refuse any Application for investment in the Conscious Investor® Fund

Signature of Individual 1	Signature of Individual 2	
Name1 (please print)	Name (please print)	
Date	Date	

Post completed application with identification documents to:

Conscious Capital Ltd c/- Link Fund Solutions PO Box 5482 Sydney NSW 2001

Extra copies of the current *Information Memorandum* are available from your financial adviser or at www.consciouscapital.com.au.