



CHANGE OF AUTHORISED SIGNATORIES FORM

Baptist Financial Services Australia Ltd (BFS)
ACN 56 002 861 789 as Agent for Indue Ltd

Client No. _____

Account Name: _____

The Authorised Signatories shown on this form are signatories for the following account/s under the above client number effective from your receipt of this notice: (please insert account numbers if required)

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If no accounts are listed above, the authorised signatories will apply to ALL accounts held under the above Client No. This authority replaces any previous authority.

Authority:

- To operate on induemoney *Cheq* accounts generally including - draw cheques, drafts or other instruments, to withdraw monies in any manner, stop or countermand payment of cheques and other instruments, give or cancel authorities in BIF or Indue's usual form for Periodical Payments, open new induemoney *Cheq* account/s, close induemoney *Cheq* account/s, authorise or change any Phone/Email Password, authorise access to and use of BIFOnline &/or BIFOnline Business, and advise changes to authorised signatories.

Tick required choice: (Please note: If this section is not completed all authorised signatories listed below must sign)

Any ONE to sign; or Any TWO to sign; or ALL to sign

AND

- I/We accept that any one of the authorised signatories may endorse cheques, drafts or other instruments payable to the order of the account (or to BIF or Indue) and lodged for the credit of the account/s, to request a statement of the account/s and to obtain any information concerning the account/s generally.

AND

3. Tick if required:

Please allow a Phone/Email Password' to be established on the account/s so that instructions to operate the account /s in respect of any of the authorities above can be given verbally or by email to BIF or Indue by any **ONE** of the authorised signatories listed below.

DETAILS OF AUTHORISED SIGNATORIES

I/We acknowledge having read, understood and accepted the terms and conditions as contained in the Induemoney 'Product Information Statement' and BFS 'Financial Services Guide and Product Disclosure Statement – BFS Non Cash Payment Products'

Title, Full Name, Home Address, Phone No & Date of Birth
(Please indicate 'Title' and PRINT details clearly)

Specimen Signature

Mr/Mrs/Miss/Ms _____ Address: _____ _____ Daytime Phone _____ Date of Birth / /	SIGN HERE
Mr/Mrs/Miss/Ms _____ Address: _____ _____ Daytime Phone _____ Date of Birth / /	SIGN HERE
Mr/Mrs/Miss/Ms _____ Address: _____ _____ Daytime Phone _____ Date of Birth / /	SIGN HERE
Mr/Mrs/Miss/Ms _____ Address: _____ _____ Daytime Phone _____ Date of Birth / /	SIGN HERE

Unless previously identified, all signatories above must provide acceptable identification before they can be operate as a signatory to any BIF account/s. If required, please use our Agent's Identification Lists form and Certification Form, or contact a BIF State Office on 1300 650 542.

(Please ensure for induemoney *Cheq* Accounts, that a 'Cheque Account Specimen Signature' form attached is also signed by each authorised signatory)

Authorised Person signature SIGN HERE	Authorised Person signature SIGN HERE
Date	Date

Baptist Financial Services Australia Ltd ABN 56 002 861 789 as agent for Indue Ltd
 *NSW/ACT – PO Box 122, Epping NSW 1710; *VIC/TAS – PO Box 377 Hawthorn VIC 3122
 *SA/NT – PO Box 432 Unley SA 5061; * WA – PO Box 57 Burswood WA 6100
 Ph: 1300 650 542 Fax: 1300 784 699 Email: info@bfs.org.au Web: <http://indue.bfs.org.au>

induemoney Cheq

Cheque Account Specimen Signature(s)

Account Name

BSB

0	3	4	–	8	7	4
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Link No (include CD if applicable)

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New Account

Variation to Existing Account
(Link Number Retained)

One Signature per box using BLACK INK ONLY

1.		2.	
3.		4.	
5.		6.	

SIGNING SPECIFICATIONS

Any one to sign

All parties to sign

Other (specify)



ACN 97 087 822 464
Tel 1300 650 542
Fax 1300 784 699
Email: info@bfs.org.au



BFS Baptist Financial
Services Australia Ltd
As agent for Indue Ltd

Authority Effective From/...../.....

Client No:

Financial Institution Authorised Signature: