JBWere

Charitable Endowment Fund

Additional Donation Form

CEF Management account name				nagement account r					ımb		
2. Additional Donation											
Please note that once a donation is accepted by the Trustee, this donation is The minimum additional donation is \$5,000.	s irr	evoc	able	and	not	able	e to	be w	ithc	draw	n.
Donation amount \$ Donation method											
Cheque or Electronic Funds Transfer (EFT)											
Please make your cheque payable to 'NATL ATF JBWERE Charitable Endow Charitable Endowment Fund. BSB: 082-001 Account: 17363-2284) stating th 'description' section of the transfer (should the CEF management account nabbreviate accordingly).	e C	EF ma	anag	gemei	nt a	cco	unt	name	e in	the	
3. Donation acknowledgement and signature(s) - All dono	rs	mus	st co	ompl	ete	thi	is s	ecti	on		
a) Donor acknowledgement											
I/We acknowledge that a completed Donation Form, together with the donatio (the Trustee), as the Trustee of CEF, to create a CEF management account und in the Information Memorandum.											et out
I am/We are over the age of 18 years.											
By signing below I/we confirm that I/we have received and understood the term Memorandum and agree to be bound by them if this Donation Form is accept		and c	onc	litions	CO	ntai	ned	in th	ie In	ıforn	nation
If I am/we are signing under a Power of Attorney, I/we declare that the Power o	f At	torne	y ha	as not	be	en a	mei	nded	or	revo	ked.
Office use only											
New date Time											

(b) Donor signature(s) 1st individual

1st individual					
Capacity (if applicable)					
Director Power of Attorney* Sole director and sole secretary	Attorn	еу			
Signed by: Full name					
Signature					
X	Date	signed (DD/MM	/YYYY)	
2nd individual					
Capacity (if applicable)					
Director Power of Attorney* Sole director and sole secretary	Attorn	еу			
Signed by: Full name					
Signature					
X	Date	signed (DD/MM	/YYYY)	
* If you are signing under a Power of Attorney, please supply an original certified copy of the Power of Attorney with spe Companies signing by duly authorised representatives must provide proper notice of the representatives to JBWere I under Power of Attorney, the attorney hereby certifies that no notice of revocation of that power has been received b associations/clubs must be signed by the authorised office bearers (e.g. A. Smith – President) and a copy of the const Return your completed Donation Form along with your cheque (unless you use EFT) to: JBWere	Investm y the at	ent Manag torney. Do	gement. If nations b	signed	rated
Philanthropic Services GPO Box 4370 Melbourne Vic 3001					
Office use only					
Representative code Advisor stamp					