

PAYMENT REQUEST FORM: INTERNATIONAL PAYMENT



Use this form to make a payment from your Powerwrap Investment Account (Cash Operating Account) to an international bank account. Note that compulsory fields are marked with an asterisk (*).

Part 1 - Portfolio details

Account name*

Account number*

Cash Operating Account (ANZ) details

BSB

Bank account number

013 - 985

Part 2 - Foreign currency / international payment details (MT103 fields)

Currency **(33)***

Amount **(33)***

Narration for portfolio (maximum 18 characters)*

Purpose*

Message to beneficiary **(70)** (maximum 18 characters)

Beneficiary name **(59)***

Beneficiary SWIFT **(57)***

Beneficiary address **(59)***

Intermediary SWIFT **(56)** (optional)

Beneficiary account number/ IBAN **(59)***

Part 3- Declaration and authorised signatures

By submitting this Payment Request Form I/we irrevocably authorise this payment to be made as specified above and understand that Powerwrap is not responsible for any errors or omissions in this Payment Request Form.

Signature of account holder 1+

Signature of account holder 2+

Date+

Date+

Name+

Name+

Part 4 - Adviser declaration

I am an Authorised Officer of the Australian Financial Service Licence (AFSL) holder. I declare that I have verbally confirmed with the Account Holder/s that all the details in this Payment Request Form are correct and I have authenticated the signatures of the Account Holder/s

Adviser signature+

Date+

Company/Dealer group (AFSL)+

Adviser name+

Part 5 - Important information

Account holders must provide the source document for certain payments. Upon receiving a satisfactorily completed Payment Request Form with supporting information and verification of the request where required, the payment will be made at the earliest opportunity (which may be the next business day).

The Australian Financial Institution through which this payment is made will be required to report all international payments and any domestic payments over \$10,000 to AUSTRAC. For all international and any domestic payment requests of \$50,000 or more, a "call back" to an Authorised Officer of the AFSL will be undertaken to authenticate a payment request.

A separate form is required for each payment request.

* mandatory field

+ all signatories and adviser must sign for request to be valid

Return this completed form and supporting documents to your Financial Adviser or Nominated Adviser Representative. Alternatively, return to us by post: Powerwrap Client Services, PO Box 16071, Collins St West VIC 8007

This form to be used in respect of Powerwrap Investment Account ARSN 137 053 073 issued by Powerwrap Limited ("Responsible Entity", "Powerwrap") ABN 67 129 756 850 AFSL 329829