



15 December 2023

Section 1: Client details

# Change of details - Investment

Please use this form for change of details including name, contact details and taxation residency details.

If you wish to renew or change your advice fees, adviser details, investment strategy, direct debit details, or nominated financial institution details, please complete the relevant form available from your financial adviser, from our website or by contacting us (where applicable).

Please complete these instructions in BLACK INK using CAPITAL LETTERS and ✓ boxes where provided.

occion i onche	30 tallo				
Account number					
Account name					
Date of birth (if applicable)					
Are you completing this form fo	or an 'individual' or an entity?				
Individual (e.g. Investor/T	rustee/Director/Controlling person)				
Entity (e.g. Company/Trus	st/Partnership/Association)				
Section 2: Chang	e of name (individuals)*				
, ,	our name has changed and you are an individual (including a person associated with an entity e.g. director or section, please ensure all fields in Section 1 have been completed.				
I confirm my residential address has not changed. (If it has please complete Section 5)					
New name					
Title (Dr/Mr/Mrs/Ms/Miss)	Surname				
Given name(s)					
Previous name					
Title (Dr/Mr/Mrs/Ms/Miss)	Surname				
Given name(s)					
Please enclose one of the follo	wing proof of change of name documents (please tick appropriate box(es)):				
An original certified cop	<b>by</b> of your marriage certificate				
An original certified cop	y of your change of name certificate				
An original certified cop	<b>by</b> of your marriage certificate and Divorce Order				
And one of the following primar	ry identification documents issued in your new name:				
An original certified cop	y of your driver's licence issued under State or Territory law				
An original certified cop	y of your passport				

Please note we can only accept a marriage and/or change of name certificate that has been issued by Birth, Deaths and Marriages

\* Please do not use this section for a change of entity name.

Registration Office.

	inal certified copy of the original documents will ne t on myexpand.com.au for a list of persons author					ompleting
Signature of client/ Power of Attorney or Guardian		Date		1	1	
Previous signature (where name has changed)		Date		/	1	
Section 3: Char	nge of entity name					
New entity name						
Previous entity name						
	documentation as proof of change of name. Pleas e an entity associated with your account.	e only comple	te this sec	tion if the na	ame of an en	tity has
Section 4: Char	nge of account name for joir	nt accou	ınts			
New account name						
Previous account name						
Please only use this section	n to update the name of the joint account. You can	not use this fo	rm to upda	te the inves	tors linked to	o the account.
Section 5: Char	nge of contact details					
	way to change your contact details, simply log into for Expand Online, please click on the 'Register for a					
If you are unable to change fields in Section 1 have been	e your contact details online, please complete the en completed.	details below.	When com	pleting this	section, ple	ase ensure all
	(es) that you require to update:					
Residential address	Mailing address Registered address	Principal	place of b	usiness		
Address						
Suburb			State		Postcode	
Country*						
(if not Australia)						
Phone (home)		Phone (work	:)			
Mobile						
Email						
If you are residing overseas	s you must complete and submit:					
an Overseas Investor	form;					
original certified copie	es of your identification documents; and					
step 7 of this form.						

<sup>\*</sup> If you are updating your country of residence we may request an original certified copy of your identification. For more information on acceptable ID and a list of certifiers refer to the Proof of Identity Guide on myexpand.com.au.

## Section 6: Change of additional address

Please provide updated add				in Step 5.							
Residential address	Mailing	g address	Regist	ered addre	ess	Princip	al pl	ace of b	ousiness		
Address							1			1	
Suburb								State		Postcode	
Phone (home)						Phone (wo	rk)				
Country* (if not Australia)											
* If you are updating your co	If you are updating your country of residence we may request an original certified copy of your identification. For more information on acceptable ID and a list of certifiers refer to the Proof of Identity Guide on myexpand.com.au.										
Section 7: Char	nge an	d con	firmatio	on of ta	аха	tion re	si	dend	cy deta	ils	
Part A:											
Please confirm your person	nal details be	elow:									
Title (Dr/Mr/Mrs/Ms/Miss)			Surname								
Given name(s)											
Date of birth											
Please confirm your addres	s type belov	w, for <b>enti</b>	ties you'll ne	ed to confir	m bo	th your regis	ster	ed addr	ess and prir	icipal place o	of business:
Residential address	Princip	oal place o	fbusiness	Registe	ered a	address					
Address							1			1 (	
Suburb								State		Postcode	
Country (if not Australia)											
If confirming multiple address types with different addresses, I have attached details of this address to this form.											
Please note we cannot acc	ept PO Box	details in t	this section.								
Part B:	Part B:										
Please answer <b>both</b> tax res	sidency que	stions as y	you can be a t	tax residen	t of m	nore than on	ne co	ountry.			
Is the Individual/Company/Trust/Partnership/Association a tax resident of Australia?											
Is the Individual/Company/Trust/Partnership/Association a tax resident of any other Country?											
If you are a tax resident of any other country please complete the details below.											
Foreign Residents on Common Reporting S		_	unt Tax Co	mplianc	e Ac	t (FATCA)	ar	nd			
Under FATCA and CRS laws, we are required to ask all investors to provide additional information about their tax residency. Tax residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work.											
For all countries where you are a tax resident please provide a TIN (Tax Identification Number) which is the number assigned by each country for the purposes of administering tax laws such as a Social Security Number in the US. If a TIN cannot be provided, please list one of the three reasons specified (A, B or C) for not providing a TIN.											
Country		TIN			_	If no TIN, pl	eas	e list Re	eason A, B c	or C	
					i						

#### Reasons for not providing a TIN:

Reason A - The country of tax residency does not issue TINs to tax residents, OR

Reason B - You have not been issued with a TIN - You must provide details for this reason below,

Reason you have not been issued with a TIN (if applicable)

OR

Reason C - The country of tax residency does not require the TIN to be disclosed.

### Section 8: Declaration and signature(s)

**Please note:** The Service Operator collects the information in this form for the purpose of updating the information it holds about you. Any personal information provided in this form will be handled in accordance with the privacy policy at **myexpand.com.au/privacy**. If you do not provide all of the requested information, we may not be able to action your request.

- I/We will promptly notify the Service Operator if any of these details change and on request with any further information which is necessary or desirable for the Service Operator to comply with any obligations it may have in connection with FATCA/CRS.
- I/We consent to the collection and use of the above information by the Service Operator for the purposes specified.
- I/We authorise any changes set out in this form to be applied to or recorded against my/our account.
- I/We declare that the details given in this form are true and correct.

Please note: If this form is signed under Power of Attorney, the Attorney declares that they have not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this form unless we have already received it). You generally cannot sign under Power of Attorney if acting on behalf on entity.

Signature	
Signatory 1  Role (such as Investor/ Director/Trustee as applicable)	Date / / /
Full name	
Additional signatu	ures (if required)
Signatory 2 Role (such as Investor/ Director/Trustee as applicable)	Date / / /
Full name	
Signatory 3 Role (such as Investor/ Director/Trustee as applicable)	Date / / /
Full name	
Signatory 4 Role (such as Investor/ Director/Trustee as applicable)	Date / / /
Full name	

Signatory 5 Role (such as Investor/	Date / / /
Director/Trustee as applicable)	
Full name	
Signatory 6 Role (such as Investor/ Director/Trustee as applicable)	Date / / /
Full name	
Common seal (of company) if required	

### Please forward all correspondence and enquiries to

Post: Expand

GPO Box 264, Melbourne VIC 3001

Email: clientfirst@myexpand.com.au

**Telephone:** 1800 517 124

Web: myexpand.com.au