

## term deposit application

## **Dnister Ukrainian Credit Co-operative Ltd**

ABN 59 087 651 394 | AFSL / Australian Credit Licence 240673 | BSB 704 235

Head Office: 912 Mt Alexander Road, Essendon VIC 3040 | PO Box 569 Essendon North 3041 | P 1800 353 041

dnister.com.au | admin@dnister.com.au

member details						
Name				Member Number		
Address				Account Number		
Email				Phone		
term of investme	nt					
Term		Interest Rate	% p.a	Amount	\$	
		Maturity Date				
interest payment	;					
Please indicate how	you would like interest paym	ents to be dealt with on	maturity.			
Re-invest (C	apitalise)					
Transfer to I	nister account number					
Other						
method of accour	t operation					
Either may s		Bot	:h must sign	Γ	At least must sign	
declaration						
I/We acknowledge having received and read the relevant Terms and Conditions relating to this Investment Account and further agree and accept to be bound by them. I/We agree to pay all charges required by Dnister in accordance with the Corporations Act and as detailed in Dnister's Fees and Charges schedule.  Please forward the completed and signed application to Dnister by mail.  If you have any queries or require further assistance, please contact our Member Services team.						
account owner / signatory - please circle			account own	account owner / signatory - please circle		
Full name			Full name			
Signature			Signature			
Member no.	Dated		Member no.		Dated	
office use only tax file nun			ber & exemptions			
Processed by  Verified by  TFN loaded	Date			You are not required to give us you TFN, however if you don't, we are required to withhold tax (at the highest marginal rate plus Medicare levy) from any interest paid to you. If you have already supplied your TFN for this membership, we will automatically link it to this new account, unless you advise us in writing not to.		
		Tax File Nu				