



14 November 2022

Overseas Investor Form

Important note

All sections must be completed.

Please provide detailed answers to all questions to minimise required follow up. Enter "N/A" where the question does not apply.

If this is signed under Power of Attorney, please enclose certified copy of the Power of Attorney and the proof of identity documents, as outlined in the 'Completing Proof of Identity' document on myexpand.com.au, for both the Applicant and the Attorney.

This form has been prepared in accordance with the Insignia Financial group's AML/CTF Program. The information collected in this form is used for 'Know your client' purposes only. Any personal information provided in this form will be handled in accordance with our privacy policy, available at myexpand.com.au/privacy.

Step 1: Account details

Account number								
Account name								
Date of birth								
Name of person completing this form (if not the same as the account name)								
Title (Dr/Mr/Mrs/Ms/Miss	Surname							
Given name(s)								
Overseas address								
Street								
Suburb	State/ province Postcode							
Country								
Email								
Phone number								
Clear and presentable original certified identification documents have been attached to this Change of address request?								
Yes No → If 'No', please ensure they are included.								

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Step 2: Details of overseas domiciled applicants

1	Please list a country of residency and select a reason why. Country:						
	Reason:						
	For work purposes						
	Returning to home country						
	To care for a family member/family commitments						
	Sea change/travel						
	Other, please specify						
2 For how long can we expect the applicant to be based overseas?							
	Temporary/contract basis for work purposes, please select one below:						
	More than 3 years						
	1–3 years						
	Less than 12 months						
	Semi-permanently, please select one below:						
3–5 years							
	More than 5 years						
	Permanently (ie indefinitely)						
3	Why are you specifically investing in to this product?						
4	Where applicable, what will the nature of the relationship between financial adviser and client be going forward?						
	(ie is the client retaining Australian domiciled investments and therefore retaining the financial adviser's services)						
(**************************************							
5	Please reconfirm the applicant's source of wealth (how the client has obtained their wealth).						
	Income from employment (eg regular and/or bonus), if yes, please provide home country employer name and details.						
	Investment income (eg rent, dividends, pension)						
	Business income						
	One-off payment (eg matured investment, court settlement, redundancy, inheritance)						
	Sale of assets (eg shares, property)						
	Windfall (eg gift, lottery, gambling)						

6	Please reconfirm the applicant's source of funds or intended source of funds? (Source of funds is where the funds for the opening of the account have originated from or where monies will be sourced for future transactions if they are based overseas)							
	Income from employment (eg regular and/or bonus)							
	Accumulated wealth or investments							
	Investment income (eg rent, dividends, pension)							
	One-off payment (eg matured investment, court settlement, redundancy, inheritance)							
	Sale of assets (eg shares, property)							
	Windfall (eg gift, lottery winnings, gambling)							
	Borrowed funds							
	Please confirm what withdrawals)	t the expected future transactions will be within t	his accour	nt? (eg. any	further deposits or expected			
St	tep 3: Declarati	ion						
Th	is form can be complete	ed by either the investor or their authorised financial adv	viser. Please	complete or	ne declaration option below.			
Inc	dividual Declaration (t	the person named in this form)						
Ву	completing and signin	g this form I declare that:						
•		are true and correct and I undertake to promptly infor as and when they occur.	rm the Trus	tee/Service	Operator of any changes to the			
•		stee/Service Operator may require further information	n in relation	to the inforr	mation supplied in this form.			
•	I am the named perso	on above or authorised under Power of Attorney to pro	vide inform	ation on the	eir behalf.			
•	I am aware that inform foreign tax authoritie	nation provided in this form and information about the is.	e Expand ac	counts may	be provided to Australian and/or			
po	wer (a certified copy of	is signed under Power of Attorney, the Attorney declar if the Power of Attorney should be submitted with this of Attorney if acting on behalf on entity.						
Sic	gnatory			Date				
Ro	le (such as Investor/Director/ stee as applicable)			50.00				
Fin	nancial Planner Declar	ration						
		g this declaration, I certify that the individual named in ed and I have no reason to doubt its reasonableness.	n this form I	has verbally	or in writing confirmed to me the tr	uth		
Lic	ensee name			AFSL No.				
Re	presentative							
Sig	gnature			Date				

Please forward all correspondence and enquiries to:

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