Application FormRetail Investors





This form may be lodged with CCFS: by post:

by email:

Churches of Christ Financial Services PO Box 5302, South Melbourne Vic 3205 info@ccfsaustralia.org.au



Helpful hints for completing this application

- This form is for Retail Investors who regularly attend a Church of Christ Church / organisation.
- Signatories on the investment (not already identified) are to complete an Identification and Verification Reference form.
- Please ensure all steps are completed where required.



Need help or have a question?

Call us on 1300 MY CCFS (1300 69 22 37) Visit us at www.ccfsaustralia.org.au or Email us at info@ccfsaustralia.org.au

Please use BLOCK LETTERS in BLACK OR BLUE PEN ONLY and ☑ tick required choices

STEP 1: YOUR DETAILS

Already a CCFS Investor? Please provide your Investor RIM Numb	er and go to STEP 3 or complet	e the following details
Name		
ABN (if applicable)	TFN (if applicable, otherwis	e write "Exempt")
Address	State	Postcode
Postal Address (if different from above)	State	Postcode

STEP 2: YOUR CHURCH

Please advise which church you are currently attending	

STEP 3: YOUR PRODUCT SELECTION

Please tick your choice(s) of investment from the following list

Please Note - Important:

If you are opening more than one account with the same signatories, simply duplicate this page for subsequent accounts.

> Fixed Term Invest	ment			
Investment duration:	Interest options:			
3 months 6 months 12 months 24 months Amount Access 31 Opening amount	Reinvest interest Gift to: State Conference New church mission Leadership development GMP		e your interest paid to ase include details below: A/C Number	
> Church Builder Balance Offset Account				
Opening amount Name of Church Loan for interest offset				
> CCFS Online Acce	SS (View only)			

STEP 4: FUNDING YOUR NEW INVESTMENT

Electronic Transfer to CCFS	Source of Funds
Should you wish to make your initial investment via EFT: BSB: 703-810 Account: 05 300 366 Account name: CCFS Reference: (Please insert last name) Amount \$	For AML/CTF* purposes we need to be able to confirm where the funds you are investing with CCFS have come from. For an individual this may include salary, sale of property, savings, inheritance, etc. For a church/organisation, this may include regular congregational giving, other operating income, rent or large donation. Please provide some details below.
Cheque Payment If you are funding investments by cheque please make the cheque payable to CCFS. Amount	*Anti-money laundering / Counter-terrorism finance

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STEP 5: DETAILS OF AUTHORISED SIGNATORIES FOR ACCOUNT

- If CCFS Online Access is required, the User RIM Number and Password will be sent to you separately.
- All new signatories not identified by CCFS must complete an Identification and Verification Reference form.
- Please note: The person listed as the primary contact will receive all investment correspondence from CCFS

7	We acknowledge having received, read and understood the Product Information Guide.				
Investor 1 (Primary Contact)					
> 1. Full Name					
Address		State	Postcode		
Postal address (if differnet from above)		State	Postcode		
Phone Email					
Date of Birth (dd/mm/yyyy) TFN					
Authorised Signature Dat	e /	/			
Investor 2					
> 2. Full Name		State	Postcode		
> 2. Full Name Address		State	Postcode Postcode		
> 2. Full Name Address Postal address (if different from above)					
> 2. Full Name Address Postal address (if different from above)					
> 2. Full Name Address Postal address (if different from above) Phone					
> 2. Full Name Address Postal address (if different from above) Phone					
> 2. Full Name Address Postal address (if different from above) Phone Email Date of Birth (dd/mm/yyyy) TFN					

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STEP 6: OPERATING INSTRUCTIONS FOR INVESTMENTS

Any sole party to sign OR All parties to sign C	Any of the nominated signatories to sign
STEP 7: INVESTORS TO SIGN HERE	ant M/s leave used and anatoral and a second the terms and
The details we have provided in this application are true and correconditions as outlined in the Product Information Guide and / or conditions.	·
We understand and acknowledge that this investment is managed promote the charitable purposes and support the work of the Chu	
COLLECTION, USE AND DISCLOSURE OF PERSONAL	INFORMATION
Information is collected from you to administer and manage your collected then it may not be possible to administer your investme with information and marketing material about other products and We do not provide your information to any other organisation wit provide administrative or other services as part of the operation of our website: www.ccfsaustralia.org.au	nt. We may use your personal information to provide you d services provided by Churches of Christ Financial Services. hout your consent, other than those organisations that
PRIVACY	
We consent to the collection, use and disclosure of our personal in	nformation as detailed in the Product Information Guide.
DISCLOSURE STATEMENT	
Churches of Christ Financial Services Limited (CCFS) ABN 86 165 5 Licence (AFSL) number 502160 and is regulated by many regulato Commission (ASIC) and the Australian Prudential Regulation Auth following important information:	rs including the Australian Securities and Investments
ASIC Investors should be aware that deposits invested with CCFS are not document or Product Disclosure Statement and be registered or h depositors' scheme is not required to be examined or approved by Deposits lodged with CCFS are designed for investors who wish to and for whom the consideration of profits are not of primary relevant.	have a trust deed under the Corporations Act 2001. The y the Australian Securities and Investments Commission. o promote the charitable and religious purposes of CCFS
APRA CCFS is not prudentially supervised by the Australian Prudential Refreceive the benefit of the financial claims scheme or the depositor in CCFS are intended to be a means for investors to support the chart I have read and acknowledged this disclaimer statement	r protection provisions in the Banking Act 1959. Investments
Authorised signatory 1 SIGN HERE	Authorised signatory 2 SIGN HERE
Print full name Date	Print full name Date
APPLICATION CHECKLIST Step 5: Have all parties signed this application?	

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Step 5: Have all new signatories completed an Identification and Verification Reference form.