



MAPLE-BROWN ABBOTT

INVESTMENT MANAGERS SINCE 1984

Electronic Verification Consent

COMPLETE THIS FORM IN CLEAR CAPITAL LETTERS.

SUBMIT THIS FORM BY:

Mail
Maple-Brown Abbott
Reply Paid 88047
Sydney NSW 2001

In person
Maple-Brown Abbott
Level 31, 259 George St
Sydney NSW 2000

TO PROVIDE CONSENT FOR US TO CONFIRM YOUR IDENTITY USING ELECTRONIC VERIFICATION, PLEASE COMPLETE AND SIGN BELOW.

VERIFICATION DETAILS

Title

Mr Mrs Miss Ms Other

Full given name(s)

Surname

Residential Address (PO Box **not** acceptable)

State

Postcode

Country

Date of birth (dd/mm/yyyy)

 / /

Drivers Licence No. (if held)

State of Issue

CONSENT

I consent to Maple-Brown Abbott confirming my identity electronically.

Signature

Date (dd/mm/yyyy)

 / /

Electronic Verification

Under the AML/CTF Act, we can disclose your name, residential address and date of birth to a credit reporting agency. The purpose of this disclosure is to request the credit reporting agency to make an assessment on whether the personal information so disclosed matches (in whole or part) the personal information contained in a credit reporting file or other data base in possession of the credit reporting agency. This electronic verification process assists us in verifying your identity.

The credit reporting agency we engage may prepare and provide us with such an assessment by using the personal information about you and the names, residential address and dates of birth contained in credit information files of other individuals. We will only use the assessment by the reporting entity for the purpose of verifying your identity for the purposes of the AML/CTF Act.