

**eDOCS PTY LTD**  
A.C.N. 096 264 667

**Postal Address:**  
PO Box 12784  
A'Beckett Street  
MELBOURNE VIC 8006

**Office Address:**  
Level 11  
160 Queen Street  
MELBOURNE VIC 3000

**Contact:**  
email: mail@edocs.net.au  
ph: (03) 9606 0622  
fax: (03) 9642 2394

**NEW SUPER DEED ORDER FORM**

**Applicant Details**

Organisation Name:

Contact Person:

Ph:

Email:

Fax:

**Street Address:**

**Postal Address:**

Suburb:

Suburb:

State: P/C:

State: P/C:

Preferred Delivery Address:

Street Address

Postal Address:

Other (please specify):

**Order Selection (please tick)**

**Printed & Bound (inc GST) \$ 297.00**

Suburb:

State: P/C:

**Payment Details**

*(please tick)*

Chq Encl On Account Mastercard Visa Bankcard Amex

**Direct Bank Credit Transfer**  
**Bank of Melbourne**  
**BSB 033146 Acc. No. 198700**

**TOTAL \$**

*(On Account approved Clients only)*

Card Number

Cardholder Name

Signature \_\_\_\_\_ Expiry Date mm yy

# NEW SUPER DEED ORDER FORM (Cont.)

## Fund Details

Name of Fund:

Jurisdiction: <State or Territory>

## Trustee Details

### Individual Trustees:

1. Name:

Address:

3. Name:

Address:

2. Name:

Address:

4. Name:

Address:

### Corporate Trustee:

Name:

ACN/ABN:

Address:

Directors of Corporate Trustee:

1.

3.

2.

4.

## Employer Details <if applicable>

Name of Employer:

ACN/ABN:

Address:

Name/s of Directors <if Company>:

1.

2.

3.

4.

## Members

1. Name:

Address:

2. Name:

Address:

3. Name:

Address:

4. Name:

Address: