# Trust

SCHMIDLI FAMILY	
Full name of the trust	SCHMIDLI FAMILY
Australian Business Number (ABN)	13025486317
Tax File Number (TFN)	Provided
	<b>Note:</b> Provision of a TFN or ABN is not compulsory, however, if you do not quote your TFN (including both TFNs for joint accounts) or ABN or claim an exemption, tax may be deducted from the interest paid to you at the highest marginal tax rate plus Medicare Levy. Declining to quote a TFN is not an offence.
ABN/TFN exemption	No
Foreign entity for tax purposes	No
Country where trust was established	AUSTRALIA
Type of trust	Other Trust Type (eg. Family, Unit)
Trust description	Family
Do the terms of the Trust Deed identify beneficiaries by reference to membership of a class?	
Nature of the trust activity	Investment
Tax information	
Please select the most appropriate category	Other
Are any of the Trust's Beneficial Owners or Controlling Persons tax residents of countries other than Australia?	No

Is the Trust a tax resident of a country other than No Australia?

# Settlor of the trust

Settlor of the trust	
No	
Individual	
Michael	
Graeme	
Bannon	
Yes	
/ No	

#### Settlor 1

Mr Michael Graeme Bannon	
Title	Mr
First name (no abbreviations)	Michael
Middle name	Graeme
Surname	Bannon
Are you an Australian resident for tax purposes?	Yes
Are you a resident of another country for tax purposes?	No
Residential address	
Street number	40
Street name	McHugh Street
Suburb	EVATT
State	ACT
Postcode	2617
Country	AUSTRALIA

Account Number: 970112942



## Company

company	
ROBERT S SCHMIDLI PTY LIMITED	
Full name of company	ROBERT S SCHMIDLI PTY LIMITED
Company type	Proprietary
Australian Company Number (ACN)	092948617
Australian Business Number (ABN)	16092948617
Nature of the business activity	Administration
Registered office address	
Street number and name	SUITE 1 91 FREDERICK STREET
Suburb	MEREWETHER
State	NSW
Post code	2291
Country	AUSTRALIA
Principal place of business address	
Street number and name	SUITE 26 JOHN JAMES MEDICAL CENTRE
	175 STRICKLAND CRESCENT
Suburb	DEAKIN
State	ACT
Post code	2600
Country	AUSTRALIA
Company authorisation details	
Company officer 1	
Company officer name	Mr ROBERT SCOTT SCHMIDLI
Authorised signatory on the account	Yes
Role in Company	Sole Director

# Company officer 1

- <b>-</b>	
Mr ROBERT SCOTT SCHMIDLI	
Title	Mr
First name (no abbreviations)	ROBERT
Middle name	SCOTT
Surname	SCHMIDLI
Any other name known by	No
Date of birth	07/09/1958
Occupation type	Professionals
Occupation category	Doctor, Veterinarian, Health Professionals
Residential address	
Street number	27
Street name	CUSTANCE Street
Suburb	FARRER
State	ACT
Postcode	2607
	AUSTRALIA
Postal address	
Street number and name or PO Box	PO Box 172
Suburb	DEAKIN WEST
State	ACT
Postcode	2600
Country	AUSTRALIA



#### **Contact details**

Mobile phone 0413614456

Email address robert@schmidli.com.au

#### Additional details

Are you an existing client? Yes

Macquarie ID/Access Code 29273588

#### **Company beneficial owners**

#### **Beneficial owners**

Are there any beneficial owners who own 25% or more Yes of the company?

Beneficial owner name Mr ROBERT SCOTT SCHMIDLI

#### **Company beneficial owner 1**

Mr ROBERT SCOTT SCHMIDLI		
	First name (no abbreviations)	ROBERT
	Middle name	SCOTT
	Surname	SCHMIDLI
	Date of birth	07/09/1958
	Occupation type	Professionals
	Occupation category	Doctor, Veterinarian, Health Professionals
Residential address		
	Street number	27
	Street name	CUSTANCE Street
	Suburb	FARRER
	State	ACT
	Postcode	2607
	Country	AUSTRALIA
Contact details		
	Mobile phone	0413614456
	Email address	robert@schmidli.com.au

#### **Trust beneficial owners**

Beneficial owners

Beneficial owner name Mr ROBERT SCOTT SCHMIDLI

#### **Trust beneficial owner 1**

	First name (no abbreviations)	ROBERT
	Middle name	SCOTT
	Surname	SCHMIDLI
	Date of birth	07/09/1958
	Occupation type	Professionals
	Occupation category	Doctor, Veterinarian, Health Professionals
	Role in entity	Sole Director
	-	
Residential address	-	
Residential address	Street number	
Residential address	Street number	
Residential address	Street number Street name	27
Residential address	Street number Street name	27 CUSTANCE Street FARRER
Residential address	Street number Street name Suburb	27 CUSTANCE Street FARRER ACT

### Macquarie Cash Management Account

Macquarie Bank Limited ABN 46 008 583 AFSL No. 237502

Country AUSTRALIA

**Contact details** 

Mobile phone 0413614456

Email address robert@schmidli.com.au

## **Trust beneficiaries**

Trust beneficiaries

Trust beneficiary name	Mr ROBERT SCOTT SCHMIDLI
Individual a tax resident of another Country	No
Trust beneficiary name	CATHERINE MARY SCHMIDLI
Individual a tax resident of another Country	No
Trust beneficiary name	RICHARD HENRY SCHMIDLI
Individual a tax resident of another Country	No
Trust beneficiary name	PETER CHARLES SCHMIDLI
Individual a tax resident of another Country	No

### Macquarie Cash Management Account details

lominated bank account	
Nominate a bank account for fund transfers	No
Recurring payments	
Set up a recurring payment from your Macquarie CMA	No
Account services	
Statement delivery	You can view and print your statements online
Deposit book	No
Additional details	
Source of funds for this account	Investments and Dividends
Purpose of this account	Investment / Growth

#### Mailing address

Mailing address

ROBERT SCHMIDLI
BOX 172
AKIN WEST
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0
STRALIA

### Authorities on the account

#### Primary financial services professional

The primary financial services professional nominated below will receive enquiry access on this account and we will attempt to contact them in the first instance if any account follow up is required.

First name	Stephen
Surname	Ballinger
Company name	Ballinger's Financial Planning
Company code	8941
Representative code	BFPNC

#### Third party authority 1

This authority will provide enquiry and/or transacting authority to additional financial services professionals or companies on your Macquarie CMA. For more information on levels of authority, please refer to the Product Information Statement.

Type of third party Financial services company Company name Australian Investment Exchange Ltd

Company code (if known) D642

Level of authority Enquiry Authority



#### Third party authority 2

Type of third party Financial services company Company name Ballinger's Financial Planning

Company code (if known) 8941

Level of authority Fee Authority only

Limited third party authority

Term Deposit opening authority No

# **Macquarie Signature Verification**

Macquarie Bank Limited ABN 46 008 583 542 AFSL 237 502



#### Return this form to

 

 Fax:
 1800 550 140
 Client services email:
 transact@macquarie.com

 Mail:
 GP0 Box 2520 SYDNEY NSW 2001
 Financial services professional email:
 adviser@macquarie.com

#### Use this form to provide Macquarie with the account holder(s) signature.

Once we have a copy of the account holder(s) signature, they can make changes to the account or instruct Macquarie on services relating to the account.

Macquarie account number or application reference number

970112942



Attach a copy of the account holder(s) driver's licence or passport.

\*Please note, the identification does not need to be certified.

### **Need help?**

For more information, contact us at:

Clients

@ transact@macquarie.com1800 806 310



Financial services professionals
adviser@macquarie.com

1800 808 508