



# Change of Name

Please use black ink, BLOCK letters and mark [x] in the appropriate boxes.

**Facility Name**

**Facility Number**

## Individual Name

**Previously known as:**

Title

First Name

Surname

**New Name:**

Title

First Name

Surname

## Acknowledgements

I request that you amend your records to show my new name as above.

I have attached an **original certified copy** of one of the following relevant documents:

- Birth certificate;
- Marriage Certificate issued by the Registrar Birth Death and Marriages (Commemorative certificates are not acceptable);
- Name change certificate; or
- Decree Nisi (certificate of divorce).

I warrant that as a result of this amendment, there has been no change in the beneficial ownership of securities held on the account.

**Old Signature**

**New Signature**

## Witness

Print Full Name

Address

Phone No

(   )

Signature

Date Signed

/  /

Leveraged Equities Limited ABN 26 051 629 282 ("the Lender") is the lender under the Bank of Queensland Margin Loan. You can contact the Lender on 1300 78 37 09. Bank of Queensland Limited ABN 32 009 656 740 ("Bank of Queensland" or "BOQ") does not lend money under or operate the BOQ Margin Loan, and does not guarantee or otherwise support the Lender's obligations in relation to the BOQ Margin Loan. No warranty or guarantee is given by Bank of Queensland for the performance of the BOQ Margin Loan or any investment acquired using money borrowed through the BOQ Margin Loan. Bank of Queensland may receive a commission from the Lender for each BOQ Margin Loan. Further details are included in the Margin Lending Application Form and associated documents.

**Please complete and return to:**

BOQ Margin Lending  
GPO Box 5388, SYDNEY NSW 2001

Fax: 1300 78 37 16

**If you require any assistance, please contact the Client Service Team on 1300 78 37 09 or email [boq@marginlending.com.au](mailto:boq@marginlending.com.au)**