

Change of Name

Complete this form using black ink, CAPITAL LETTERS and mark [x] in the appropriate boxes.

1 Facility Detail	S	
Borrower name		
Loan account number		
2 Individual Nai	me	
Previously known as:		
Title and Full Name		
New Name:		
Title		
First Name		
Surname		
3 Identification	Requirements	
Attach one of the follow	ing forms of identification. Copy must	be originally certified.
Birth certificate	Name Change Certificate	Decree Nisi (certificate of divorce)
4 Acknowledge	ment and Execution	riages (Commemorative certificates are not acceptable)
	r consent to have your name changed o beneficial ownership of securities held	on the Loan Account; and I on the Secured Portfolio as a result of this amendment.
Old Signature		New Signature
Witness		
	tness confirms that they observed the	Borrower sign this form in person.
Full Name		
Address		
Phone]
Signature		Date
Submit this form by	:	
Mail: Leveraged, G	PO BOX 5388, Sydney NSW 2001	
For any enquiries please	e contact us on 1300 307 807	
Proudly part of	Bendigoand AdelaideBank	

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