

Verifying Officer Nomination for Electronic Value Cards

Complete this form when nominating a person(s) to be a Verifying Officer for your organisation in respect of your organisation's electronic value card facility approved by Westpac.

Part A: Organisation Details

Full name of organisation

ABN/ACN/ARBN

Organisation Type (please tick (✓) one or more of the following, as applicable):

- | | |
|---|--|
| <p><input type="checkbox"/> A public company within the meaning of the Corporations Act.</p> <p><input type="checkbox"/> A proprietary company within the meaning of the Corporations Act that has been registered with ASIC for at least two (2) years.</p> <p><input type="checkbox"/> A foreign company carrying on business in Australia within the meaning of the Corporations Act that has either been:</p> <p style="margin-left: 20px;"><input type="checkbox"/> Registered with ASIC as a foreign company for at least two (2) years; or</p> <p style="margin-left: 20px;"><input type="checkbox"/> Registered with a foreign registration body for at least two (2) years [Please name registration body and place]:</p> <div style="border: 1px solid black; width: 150px; height: 20px; margin-left: 20px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px; margin-left: 20px;"></div> <p><input type="checkbox"/> A subsidiary of a public company within the meaning of the Corporations Act.</p> <p><input type="checkbox"/> A bank.</p> | <p><input type="checkbox"/> A body corporate established under legislation in Australia (Please name the legislation including jurisdiction):</p> <div style="border: 1px solid black; width: 150px; height: 20px; margin-left: 20px;"></div> <p><input type="checkbox"/> A building society registered under state legislation in Australia.</p> <p><input type="checkbox"/> A credit union registered under state legislation in Australia.</p> <p><input type="checkbox"/> An incorporated association operating under state legislation in Australia.</p> <p><input type="checkbox"/> A regulated partnership where the regulation is governed by state legislation within Australia.</p> <p><input type="checkbox"/> A registered co-operative under state legislation in Australia.</p> <p><input type="checkbox"/> An Australian state or federal governmental or semi-governmental body.</p> |
|---|--|

Part B: Nomination

The organisation nominates the person(s) named in Part C, (including any continuation of Part C in an annexure to this form), severally, as Verifying Officer(s) to identify cardholders as agents of the organisation in accordance with the Anti-Money Laundering & Counter-Terrorism Financing Act and Rules made under it (the "AML Law").

A Verifying Officer may identify cardholders by collecting the full name of each cardholder, the title of the position or role held by the cardholder with the organisation, a copy of the signature of the cardholder, evidence of the cardholder's authority to act on behalf of the organisation and details of the cardholder's identification documents sighted by the Verifying Officer and will be required to certify this to Westpac using a form provided by Westpac.

Each Verifying Officer, by signing this form, accepts nomination.

Part C: Verifying Officer Details

Verifying Officer 1	
Full name	
Residential Address	
Date of birth	/ /
Signature	

Verifying Officer 1	
Full name	
Residential Address	
Date of birth	/ /
Signature	

Tick (✓) this box if additional Verifying Officer Details are included in an annexure to this form.

Part D: The card facility

The Verifying Officers are nominated as Verifying Officers only in respect to the organisation's electronic value card facility with Westpac.

Part E: Agreements

Each Verifying Officer acknowledges that the personal information about him or her collected in Part C (including any continuation of Part C in an annexure to this form) is required to satisfy identification requirements under the AML Law and may be exchanged with other members of the Westpac group.

The Authorised Representatives of the organisation, by signing this form, confirm and agree that:

- they are authorised to sign this nomination form on behalf of the organisation; and
- the organisation must advise Westpac as soon as practicable should a nomination be revoked.

Both the Authorised Representatives and the Verifying Officers, by signing this form, confirm and agree that

- the Verifying Officers nominated must be fully identified by Westpac (and not by another Verifying Officer) for the purposes of this nomination before acting as a Verifying Officer and that Westpac may decline to accept a nomination for reasons associated with its obligations under the AML Law without being required to give reasons;
- the Verifying Officer is not, by this form, authorised to appoint cardholders; and
- they are aware that it is an offence under the AML Law to knowingly provide false or misleading information or knowingly produce a false or misleading document. Penalty: Imprisonment for 10 years.

[If signed on behalf of an Australian company this form may be signed by 2 directors or a director and secretary. In all other cases evidence of authority to sign must be made available to Westpac if not already held by it.]

Authorised Representative 1	
Full name	
Position	
Signature	
Date of birth	/ /

Authorised Representative 2	
Full name	
Position	
Signature	
Date of birth	/ /

Westpac Use Only

Organisation's WBCIDV No.

Verifying Officer's Full Name	WBCIDV No.	CIS Key
1.		
2.		

Westpac officer's name

Branch/Department

Salary no.

BSB

Signature

Date

Annexure to Verifying Officer Nomination for Electronic Value Cards

Full name of organisation

Date of nomination

Part C: Details of Verifying Officer – Continued

Verifying Officer 3	
Full name	
Residential Address	
Date of birth	/ /
Signature	

Verifying Officer 4	
Full name	
Residential Address	
Date of birth	/ /
Signature	

Verifying Officer 5	
Full name	
Residential Address	
Date of birth	/ /
Signature	

Verifying Officer 6	
Full name	
Residential Address	
Date of birth	/ /
Signature	

Westpac Use Only

Organisation's WBCIDV No.

Verifying Officer's Full Name	WBCIDV No.	CIS Key
1.		
2.		
3.		
4.		
5.		
6.		

Westpac officer's name

Branch/Department

Salary no.

BSB

Signature

Date