

## **IDENTIFICATION FORM GOVERNMENT BODY**

GUIDE TO COMPLETING THIS FORM

o This form is for GOVE	ERNMENT BODIE	S only.								
SECTION 1: GOV	ERNMENT	BODY IDEN	NTIFICATI	ON PR	OCEDUR	RE				
1.1 General Information	on									
Full name of Governme	ent Body									
Principal place of opera	ations (PO Box i	is NOT acceptabl	le)							
Street										
Suburb				State		Postc	ode		Country	
1.2 Government Infor	mation (select	t√ only ONE o	f the following	g categori	ies and prov	vide the	informa	ation reque	ested)	
☐ Commonwealth	of Australia Go	overnment Body	у							
☐ Australian State	or Territory Go	overnment Body	y please s	specify St	tate or Terri	itory				
☐ Foreign (Non-Au	ustralian) Gove	rnment Body	please s	specify Fo	oreign Cour	ntry				
If the Government Bod	y is Australian,	proceed to Se	ction 2 (no ne	eed to pro	vide Benefi	icial Owr	nership	o informatio	on).	
1.3 Beneficial Owners	ship – for Fore	eign Governme	ent bodies o	nly						
For Foreign Governme President, Treasurer or				luals that	directly or i	ndirectly	contro	ol* the Gov	ernment Body	y, such as the Chairman,
* includes exercising coarrangements, underst			determine de	cisions al	bout financi	ial or ope	erating	policies; o	r by means of	f trusts, agreements,
	anding & practi	ices.								
•		ide a legible c	ertified copy	of ID for	each of th	nese ind	ividua	ıls.		
Complete all fields be	elow and provi	ide a legible co	ertified copy Beneficia			nese ind	ividua		ficial Owner	3
Complete all fields be	elow and provi	ide a legible co		l Owner:		nese ind	ividua	Bene	eficial Owner en name(s)	3
Complete all fields be	elow and provi	ide a legible co	Beneficia	l Owner:		nese ind	ividua	Bene		3
Complete all fields be	elow and provi	ide a legible co	Beneficia	l Owner:		nese ind	ividua	Bene		3
Complete all fields be	elow and provi	ide a legible co	Beneficia	l Owner:		nese ind	ividua	Bene	en name(s)	3
Beneficial Owner Full given name(s)	elow and provi	ide a legible c	Beneficia Full given na	l Owner:		nese ind	ividua	Full give	en name(s)	3
Beneficial Owner Full given name(s)  Surname  Residential Address	elow and provi	ide a legible co	Beneficia Full given na Surname Residential A	ame(s)		nese ind	ividua	Full give Surnam	en name(s) e	3
Beneficial Owner Full given name(s)  Surname	elow and provi	ide a legible co	Beneficia Full given na Surname	ame(s)		nese ind	ividua	Full give Surnam	en name(s)	
Beneficial Owner Full given name(s)  Surname  Residential Address	elow and provi	ide a legible c	Beneficia Full given na Surname Residential A	ame(s)		nese ind	ividua	Full give Surnam	en name(s) e	3
Beneficial Owner Full given name(s)  Surname  Residential Address	elow and provi	ide a legible co	Beneficia Full given na Surname Residential A	ame(s)		nese ind	ividua	Full give Surnam	en name(s) e	
Beneficial Owner Full given name(s)  Surname  Residential Address (PO Box is NOT acceptable)	elow and provi	ide a legible c	Surname  Residential A (PO Box is NOT acc	ame(s)	2		ividua	Surnam Resider	en name(s) e	
Beneficial Owner Full given name(s)  Surname  Residential Address	elow and provi	ide a legible co	Beneficia Full given na Surname Residential A	ame(s)			ividua	Full give Surnam	en name(s) e	State
Beneficial Owner Full given name(s)  Surname  Residential Address (PO Box is NOT acceptable)	elow and provi		Surname  Residential A (PO Box is NOT acc	ame(s)	2		ividua	Surnam Resider	en name(s)  e  ntial Address	
Beneficial Owner Full given name(s)  Surname  Residential Address (PO Box is NOT acceptable)  Suburb	elow and provi		Surname  Residential A (PO Box is NOT acc	ame(s)  Address  Appendix of the control of the con	State		ividua	Surnam  Resider (PO Box is to	en name(s)  e  ntial Address  NOT acceptable)	State
Residential Address (PO Box is NOT acceptable)  Suburb  Country  Date of Birth	State Postcoc	de	Surname  Residential A (PO Box is NOT acc)  Suburb  Country  Date of Birth	Address	State Posto	code	ividua	Surnam Resider (PO Box is I	en name(s)  e  ntial Address  NOT acceptable)	State
Residential Address (PO Box is NOT acceptable)  Suburb  Country	State Postcoc	de	Surname  Residential A (PO Box is NOT acc)  Suburb  Country	Address	State Posto	code	ividua	Surnam  Resider (PO Box is I)  Suburb  Country  Date of	en name(s)  e  ntial Address  NOT acceptable)  Birth	State

If there are more Beneficial Owners, provide details on a separate sheet and tick this box  $\square$  .

## **SECTION 2: GOVERNMENT BODY VERIFICATION**

This section outlines the identification documents that we must collect from you and it differs depending on government body type.

## Section 2.1: Documentation Requirements for Government Body Verification

Cross 'X'	Please mark with a 'X' one of the following options which you are providing with your application form. You must select one option and attach it to your application form.
	An extract from the relevant Commonwealth, State, Territory or Foreign government website evidencing the full name of the Government Body and its principal place of operations.
	An extract from a relevant Commonwealth, State, Territory or Foreign Country register of government bodies evidencing the full name of the Government Body and its principal place of operations.
	A copy or extract of the legislation establishing the body obtained from a reliable and independent source, such as a government website and evidencing the full name of the Government Body and its principal place of operations.

## Section 2.2: Documentation Requirements for Individual Verification - for Foreign Government bodies only

Cross 'X'	If the entity is a Foreign Government Body, you must provide an original certified copy of one of the following types of identification documents for each beneficial owner shown in 1.3.* Please attach each identification copy to your application form.							
	<ul> <li>Australian State / Territory driver's licence containing a photograph of the person</li> <li>Australian passport (a passport that has expired within the preceding 2 years is acceptable)</li> </ul>							
	<ul> <li>Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person</li> <li>Foreign passport or similar travel document containing a photograph and the signature of the person</li> </ul>							

<sup>\*</sup> For other identification documentation options, instructions on how to certify a document, and who can certify copies of identification documents please refer to the Customer ID form for individuals which is available on our website at ssga.com