Share Registry Tax File Number Notification

Bendigo and Adelaide Bank

Use a black pen. Print in capital letters. A B C 1 2 3

SRN / HIN:

Full Name(s) and Addresses of Registered

Town / Suburb: State: Post Code:

Tax File Number (Insert the Number(s) in the Appropriate Area)

TFN for Individual or First Holder:

ABN for Individual or First Holder:

TFN for Second Joint Holder:

ABN for Second Joint Holder:

TFN for Company, Partnership, Trust or Super Fund:

ABN for Company, Partnership, Trust or Super Fund:

☐ Company ☐ Partnership ☐ Trust ☐ Super Fund

Exemption (If Applicable):

Upon completion, please forward all correspondence to:

Bendigo and Adelaide Bank Limited Share Registry
PO Box 480 BENDIGO VIC 3552
Phone: 1800 646 042 Fax: 03 5485 7645