

B. Are you seeking a source of supplemental income (which may not be regular or recurrent) in addition to the above investment objective? (select only one option)

Note: If your primary objective is Capital Growth or Capital Preservation, but you are also seeking the potential for income supplemental to those objectives, select 'Yes'. If Income Distribution is your primary investment objective, please select Income Distribution in Question A, and 'No' for Question B.

Yes

No

C. What is your investment timeframe in relation to this investment? (select only one option)

Equal to 7 years or more (i.e. Long term)

Equal to 5 years but less than 7 years (i.e. Medium to long term)

More than 2 years but less than 5 years (i.e. Medium term)

Up to and including 2 years (i.e. Short term)

D. Under normal circumstances, within what period do you expect to be able to access your funds for this investment? (select only one option)

At issuer's discretion

Within ten years of the request

Within five years of the request

Within one year of the request

Within three months of the request

Within one month of the request

Within one week of the request

E. In relation to this investment, which investment risk and return profile best describes you? (select only one option)

We note again, that this question is in relation to this investment in particular, **and not to your overall risk and return profile**. In other words, what role are you expecting the fund to play in your overall portfolio.

I am seeking a fund with a low risk and return profile:

You are looking for an investment that is low risk in nature (e.g. you have the ability to tolerate **up to one negative return over a 20-year period** and you are comfortable with a low target return from this investment. Funds designed to provide low risk and return typically provide capital preservation and invest in cash or cash like investments).

I am seeking a fund with a medium risk and return profile:

You are looking for an investment that is moderate or medium risk in nature (e.g. you have the ability to tolerate **up to four negative returns over a 20-year period** and you are comfortable with a moderate target return from this investment. Funds designed to provide a medium risk and return are typically invested in defensive assets, such as fixed income products).

I am seeking a fund with a high risk and return profile:

You are looking for an investment that is higher risk in nature (e.g. you have the ability to tolerate **up to six negative returns over a 20-year period** in order to achieve a higher target return from this investment. Funds with a high risk and return are typically invested in growth assets which include shares and property investments).

I am seeking a fund with a very high risk and return profile:

You are looking for an investment that is very high risk in nature (e.g. you have the ability to tolerate **six or more negative returns over a 20-year period** as you are seeking to maximise returns and you can accept higher potential losses. Products with Very High risk and return are typically higher conviction portfolio such as concentrated share funds, hedge funds and other growth alternative assets).

I am seeking a fund with an extremely high risk and return:

You are looking for an investment that is extremely high risk in nature (e.g. you can **accept significant volatility and losses** as you are **seeking to obtain accelerated returns** (potentially in a short timeframe). Products with an extremely high risk and return profile are typically speculative investments in niche asset classes such as crypto assets).

F. What percentage of your total investable assets are you directing into this fund (i.e. the total assets you have available for investment, excluding your residential home)? (select only one option)

Satellite allocation (up to 10%)

Minor allocation (up to 25%)

Core component (up to 50%)

Major allocation (up to 75%)

Solution/Standalone (up to 100%)

G. Where did you obtain your application form? (select only one option)

Fund Manager Website

Financial Adviser

Referred by a friend/colleague

Advertisement

Other

Section B: Investor details

What is the full legal name of the individual or sole trader that will hold title of the units?

Full name of account designation

If you are an existing investor, please provide your account number

I/We confirm there are no changes to our identification documents previously provided and that these remain current and valid.

I/We confirm there are no changes to the information in our previous application provided and that it remains current and valid.

Section C: Are you investing using funds borrowed under a margin loan?

No - go to **section 1** Yes - please complete the details below

Name of margin lender

Name of borrower

Borrower's TFN

Loan number

If the person who will hold legal title to the units will be the borrower granting Power of Attorney to the margin lender or its nominee, please complete this form as an individual.

1. INVESTOR DETAILS

Complete all details below in respect of the individual(s) or sole trader(s) that will hold legal title to the units.

Investor 1

Title Given name(s) Surname

Business name (if sole trader)

ABN (if any, for sole trader)

Date of birth (DD/MM/YYYY) / / Occupation

Residential address (or, if you are a sole trader, principal place of business) - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit Street number Street name

Suburb State Postcode Country

Postal address (if different to residential address) - (RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit	Street number	Street name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact details

Home number (including country and area code)	Mobile number (including country code)
<input type="text"/>	<input type="text"/>
Email (default address for all correspondence)	
<input type="text"/>	

Tax details - Australian residents If you are an Australian resident for tax purposes, please provide your tax file number (TFN) or a reason for exemption. If you are an Australian resident and do not provide your TFN, or a reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN	Reason for exemption
<input type="text"/>	<input type="text"/>

Investor 2

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Business name (if sole trader) <input type="text"/>		
ABN (if any, for sole trader) <input type="text"/>		
Date of birth (DD/MM/YYYY)	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Occupation <input type="text"/>

Residential address (or, if you are a sole trader, principal place of business) - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable) <input type="text"/>			
Unit	Street number	Street name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Postal address (if different to residential address) - (RMB/Locked Bag is not acceptable)

Property/building name (if applicable) <input type="text"/>			
Unit	Street number	Street name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact details

Home number (including country and area code)	Mobile number (including country code)
<input type="text"/>	<input type="text"/>

Email

All correspondence will be sent to the email address provided by **Investor 1**.

Tax details - Australian residents If you are an Australian resident for tax purposes, please provide your tax file number (TFN) or a reason for exemption. If you are an Australian resident and do not provide your TFN, or a reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN

Reason for exemption

If there are more than two individuals, please complete a separate application form signed by each additional applicant and submit it together with this form.

If clarification is required please contact us on 1300 788 031.

2. VERIFICATION PROCEDURE

If you cannot meet the requirements of **option A**, please follow the instructions in **option B**.

OPTION A

Provide a certified copy* of one of the following:

- | | |
|--|--------------------------|
| Current Australian Driver's Licence containing a photo of the person (scan the front and back) | <input type="checkbox"/> |
| Current Australian Passport or an Australian Passport that has expired within the preceding 2 years | <input type="checkbox"/> |
| Current Australian State or Territory Government Identity Card showing the person's date of birth, photo and signature | <input type="checkbox"/> |
| Current Foreign Government Identity Card showing the person's date of birth, photo and signature** | <input type="checkbox"/> |
| Current Foreign Driver's Licence showing the person's date of birth, photo and signature** | <input type="checkbox"/> |
| Current Foreign Passport showing the person's date of birth, photo and signature** | <input type="checkbox"/> |

OPTION B

If you can't provide any document from option A, then please provide a certified copy* of one document from group 1 and one document from group 2.

GROUP 1

- | | |
|---|--------------------------|
| Birth Certificate or Birth Extract issued by an Australian State or Territory | <input type="checkbox"/> |
| Australian Government issued Citizenship Certificate | <input type="checkbox"/> |
| Current Concession or Health Care Card issued by Centrelink (scan the front and back) | <input type="checkbox"/> |

GROUP 2

- | | |
|---|--------------------------|
| Commonwealth, State or Territory Government Notice within the preceding 12 months and recording the provision of financial benefits | <input type="checkbox"/> |
| Australian Taxation Office Notice within the preceding 12 months and recording the debt payable to or by the individual by or to (respectively) the ATO | <input type="checkbox"/> |
| Local Government or Utilities Provider Statement within the preceding 3 months and recording the provision of services | <input type="checkbox"/> |

If the investor is below the age of 18, please contact us on 1300 788 031

*Please see the FAQs at the end of this form for the meaning of certified copy.

**If the document is written in a language other than English, it must be accompanied by an English translation prepared by an accredited translator.

3. INVESTMENT & DISTRIBUTION INSTRUCTIONS

Specify your initial application amount.

The minimum investment amount is \$5,000 per fund.

Indicate your distribution choice below. If you do not make an election, distributions will be reinvested.

Fund name	APIR	Investment amount AUD\$	Distribution option (indicate (X) one option per fund)	
			Pay to my bank a/c	Reinvest
Altius Sustainable Short Term Income Fund – Retail	AUS1392AU	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wholesale Cash Fund	WCF0001AU	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Altius Green Bond Fund - Retail	AUS9041AU	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Altius Sustainable Bond Fund	AUS0071AU	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate the source & origin of funds being invested.

Savings	<input type="checkbox"/>
Superannuation contributions	<input type="checkbox"/>
Income from employment - regular and/or bonus	<input type="checkbox"/>
Normal course of business	<input type="checkbox"/>
Investment	<input type="checkbox"/>
Donation/gift	<input type="checkbox"/>
Inheritance	<input type="checkbox"/>
Sale of assets (e.g. shares, property)	<input type="checkbox"/>
Other <input type="text"/>	<input type="checkbox"/>

4. PAYMENT OF APPLICATION AMOUNT

Select your payment method and complete the relevant section if applicable. All payments must be made in AUD.

EFT

Direct debit

EFT	Electronic Funds Transfer
Account name:	AUSTRALIAN ETHICAL INVESTMENT LTD- ALTIUS APPS ACCOUNT
BSB:	082-967
Account number:	795221420
Your reference:	<i>[please use the name of the investor and investor number]</i>

Direct debit authority - Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

We use OneVue Fund Services Pty Ltd as our external service provider to process your application and payment. By completing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and OneVue Fund Services Pty Ltd, as set out in this request and in your Direct Debit Request Service Agreement.

Financial institution name

Branch name

Account name

BSB number

Account number

I/We request and authorise OneVue Fund Services Pty Ltd to arrange, through its own financial institution, a debit to the nominated account as deemed payable by our administrator. OneVue Fund Services Pty provides its services to Australian Unity Funds Management Limited ABN 60 071 497 115 (User ID 623200) who are acting as Agent for Australian Ethical through the Transition Services Agreement.

Signature of primary account holder

Please print full name

Date (DD/MM/YYYY)

Signature of joint account holder (if applicable)

Please print full name

Date (DD/MM/YYYY)

5. FINANCIAL INSTITUTION ACCOUNT DETAILS

Australian bank account details

Please provide your bank account details if you have selected to take your distribution in cash or wish to provide these details for future redemptions. We will only pay cash proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts.

Financial institution name

Branch name

Name of account holder(s)

BSB number

Account number

Foreign bank account details

Financial institution name

Financial institution address

Account number

Account name

SWIFT/BIC

ABA/FED (US)

IBAN (Europe)

6. REGULAR SAVINGS PLAN

I/We would like to establish a regular savings plan

Monthly investment amount AUD\$ (minimum \$100 per month).

Please complete the direct debit request in **section 4** above (Payment of application amount).

7. COMMUNICATION

Automatic online account access

Online access enables you to view details of your investments (account balance, investment details and account statements). We will send you the necessary registration details by post once your application is processed.

Note: You may receive marketing material (e.g. market commentary, event invitations) from us, from time to time. Please indicate if you do not wish to receive these communications.

Annual & semi-annual report options

The annual and any semi-annual financial statements of the fund are available free on our website. If you would like to receive a copy by post or email, please indicate below. (This refers to annual and semi-annual reports only. This will not affect communication instructions regarding general correspondence for your fund).

By email By post

Marketing material

You may receive information from us via mail, telephone, email or other electronic messaging service relating to market commentary, services or information that may be of interest to you. By providing us with your contact details you consent to being contacted by these methods for these purposes. Please indicate if you do not wish to receive marketing information from us or any companies within our group.

8. FINANCIAL ADVISER DETAILS

Use this section to tell us about your financial adviser. If you change your financial adviser, it's important to let us know in a timely way. If you would like your financial adviser to receive copies of your statements by email, please enter their email address below.

Adviser email address

Operating your account

Do you want your financial adviser to be able to operate your account?

No

Yes - Please complete **section 9** (Authorised representative of investor).

In general, an appointed financial adviser can do everything you can do with your investment, except appoint another person to operate your account. It is important to tell us promptly if you no longer wish your financial adviser to operate your account, or if your financial adviser changes - OneVue will keep accepting their instructions until you or your adviser inform us in writing that the appointment has terminated.

We may suspend or terminate their appointment for any reason considered reasonable, and may change the terms on which they operate your account.

You indemnify us from any loss you or we suffer as a result of the actions of your appointed financial adviser, and agree to ratify their actions if we ask.

Notice to financial adviser: by completing this section of the application form, you are confirming that you hold a current Australian Financial Services Licence (AFSL), or are otherwise authorised to advise on and arrange this product.

Details

AFSL holder name AFSL number

Adviser name

Advisor code or Authorised representative number ABN

Property/building name

Unit Street number Street name

Suburb State Postcode Country

Phone Mobile

Performance of investor identification & verification procedures

Please indicate below whether client identification and verification procedures have been performed.

No - I have not performed the applicable customer identification procedure on this investor.

Yes - I have completed the applicable customer identification procedure on this investor.

Financial adviser declaration

Notice to financial adviser: please note that reliance on the KYC performed by the financial adviser is only acceptable if all the criteria below is met.

I hold an AFSL in my own name or have been appointed as an authorised representative by the licensee.

I am a reporting entity for AML/CTF purposes.

The issuer has reasonable grounds to believe that it is appropriate to rely on the KYC procedure I have undertaken.

I have attached the KYC documents to this form.

AFSL full legal entity name

AFSL number

Please print full name

Signature

9. AUTHORISED REPRESENTATIVE OF INVESTOR

Please complete this section if you wish to appoint an individual or individuals to act on your behalf in relation to your investment in the fund. If you have appointed an entity as your authorised representative, please contact us on 1300 788 031 to obtain the relevant KYC form.

9.1 Authorised representative details

Authorised representative 1

Title

Given name(s)

Surname

Authorised representative's phone number

Email

Authorised representative's signature

Authorised representative 2

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Authorised representative's phone number

Email

Authorised representative's signature

If you wish to appoint more than two authorised representatives, please complete the details on a separate sheet and attach to this application form.

9.2 How authorised representatives may act in relation to the account?

Tick applicable

Each authorised representative listed above may provide instructions in relation to the investment individually without the consent of the other

All authorised representatives must act jointly to provide instructions in relation to the investment

Other arrangement - please provide details

9.3 Verification procedure for authorised representatives who are individuals

For each authorised representative, please provide verification documents in accordance with the verification procedure in **section 2**. In addition, please provide evidence of each authorised representative's authority to act on behalf of the investor. Please tick the document(s) you have provided.

Verification documents - mandatory

A certified copy of ID as per **section 2**

Authorised representative's authority - one of the following (not required for a Financial Adviser listed in **Section 8**)

Certified copy of the authorising document (e.g. POA); or

A certified copy of a guardianship order; or

Other arrangement - please provide details

I confirm that the document authorising each authorised representative is still valid and has not been revoked.

10. GLOBAL TAX REPORTING REQUIREMENTS (FATCA/CRS)

Why you need to complete this section?

The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and a number of other foreign Governments have an agreement which requires us to obtain certain information from investors, including taxation information. You may be liable to a penalty if you provide information that is false or misleading that is material. We may decide not to open an account without first receiving the required information. For more information, visit www.ato.gov.au.

If you are unsure of any of the answers, please contact a legal or accounting professional.

10.1 Tax Residence - Individual/Sole Trader

HELP

Tell me about tax residence

You can be a resident of more than one country for tax purposes. Whether you are tax resident of a particular country for tax purposes is often based on the amount of time you spend in a country and the location of your residence and/or place of work. If you pay tax or have a tax liability somewhere, you are probably a tax resident there. Dual citizenship often brings dual tax residency. It depends on the country. For the US, tax residency can be as a result of citizenship or residency for tax purposes.

If you're unsure, ask someone who knows, usually your accountant.

10.1.1 Individual - Investor 1

Are you a US resident for tax purposes?

No

Yes - please tell us your TIN.

HELP

What is a TIN?

This is short for Taxpayer Identification Number, an identification number issued or used by tax authorities. In Australia, the equivalent is the tax file number (TFN). For the US, it could for example be a US Social Security Number, a US Individual Taxpayer Identification Number or a US Employer Identification Number. In other countries, it may have a different name.

Are you a resident of any other country for tax purposes?

Other than the US or Australia

No

Yes - please tell us which ones, using the following table.

HELP

No TIN? Reasons we accept are:

- Reason A: The country of tax residency does not issue TINs to its tax residents
- Reason B: The entity/individual has not been issued with a TIN
- Reason C: The country of tax residency does not require the TIN to be disclosed

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See above HELP box.
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>

10.1.2 Individual - Investor 2

Are you a US resident for tax purposes?

- No Yes - please tell us your TIN.

HELP

What is a TIN?

This is short for Taxpayer Identification Number, an identification number issued or used by tax authorities. In Australia, the equivalent is the tax file number (TFN). For the US, it could for example be a US Social Security Number, a US Individual Taxpayer Identification Number or a US Employer Identification Number. In other countries, it may have a different name.

Are you a resident of any other country for tax purposes?

Other than the US or Australia

- No Yes - please tell us which ones, using the following table.

HELP

No TIN? Reasons we accept are:

- Reason A: The country of tax residency does not issue TINs to its tax residents
- Reason B: The entity/individual has not been issued with a TIN
- Reason C: The country of tax residency does not require the TIN to be disclosed

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See above HELP box.
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>

11. DECLARATIONS & ACKNOWLEDGMENTS

Please read the declarations below before signing this form. The required signature(s) are detailed at the bottom of this form.

When you apply to invest, you (the applicant) are telling us:

- to the best of your knowledge, all details in this application (including all related documents provided) are true, correct and complete
- you have received, read and understood the current PDS. You agree to be bound by the constitution of the fund, the PDS as supplemented, replaced or re-issued from time to time
- you are not bankrupt or a minor, and are authorised to sign this form
- you have received and accepted this offer in Australia
- you have read and understood the information relating to privacy in the PDS
- I consent to the issuer disclosing my personal information to any issuer's service providers, in relation to any identification and verification that the issuer is required to undertake on me, as required under the AML/CTF Act. This shall include any information:
 - required by any third party document verification service provider, and/or
 - provided to any third party document verification service provider.

By applying to invest you also acknowledge that:

- monies deposited are not associated with crime, money laundering and/or financing terrorism. We may decide to delay or refuse any request or transaction, including by suspending the issue or redemption of units. If we are concerned that the request or transaction may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/CRS obligations, we will incur no liability to you if we do so
- we may take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether in Australia or outside Australia, or to any relevant Australian or foreign regulator, and
- we collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in Australian Ethical's privacy policy available online at www.australianethical.com.au/privacy-policy or by contacting us.

Important information

- nothing in this form is advice and 'help' is general guidance only. Seek professional advice to be sure of your answers
- it is a condition of investing that you keep your details (including tax detail) with us, up to date. We recommend that you review this tax information form at the end of the financial year and update your details if required. You must contact us when you learn new things about the matters in this form. Failing to update us can have tax and other consequences. You can update us by requesting and completing this form and emailing, faxing or posting it to our Administrator.

By completing and signing this form:

- you represent having read and understood this form
- you represent this form is complete and accurate
- if you have applied for but not received your TIN or GIIN, you undertake to inform us within 30 days of receiving it
- you undertake that if information in this form changes, you will tell us within 30 days
- you declare that to the best of your knowledge and belief the information provided in the Global Tax Reporting section is true and correct
- you agree to notify Australian Ethical of any changes to your tax residency or that of any beneficial owners or controlling person

12. SIGNATURE(S)

All applicants must sign.

Signature 1

Signature

Date (DD/MM/YY) / /

Full name

Capacity

Investor 1

Authorised Representative

Signature 3

Signature

Date (DD/MM/YY) / /

Full name

Capacity

Investor 3

Authorised Representative

Signature 2

Signature

Date (DD/MM/YY) / /

Full name

Capacity

Investor 2

Authorised Representative

Signature 4

Signature

Date (DD/MM/YY) / /

Full name

Capacity

Investor 4

Authorised Representative

<p>Translating documents by an accredited translator</p>	<p>In Australia an accredited translator means a professional translator accredited by the National Accreditation Authority for Translators and Interpreters at or above professional level.</p> <ul style="list-style-type: none"> • NAATI (https://www.naati.com.au/) <p>In an overseas country, an accredited translator is a professional translator accredited by a NAATI equivalent authority. For these, escalate to the AML Compliance Officer for assistance.</p>
<p>Getting your copies certified</p>	<p>Any document(s) requiring to be certified for verification purposes must be certified by an eligible person to be a true copy of the original document. Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.</p>
<p>Example of certification</p>	<p>I certify that this is a true and correct copy of the original document</p> <p>Signature of Certifier</p> <p>Name of Certifier</p> <p>Capacity of certifier - e.g. Justice of the Peace</p> <p>Date of certification (DD/MM/YYYY)</p>
<p>List of occupations that can certify (from the Statutory Declaration Regulations 2018)</p>	<ul style="list-style-type: none"> • Architect • Chiropractor • Dentist • Financial adviser or financial planner • Legal practitioner • Medical practitioner • Midwife • Migration authorised representative registered under Division 3 of Part 3 of the Migration Act 1958 • Nurse • Occupational therapist • Optometrist • Patent attorney • Pharmacist • Physiotherapist • Psychologist • Trade marks attorney • Veterinary surgeon.
<p>List of persons who can certify</p>	<ul style="list-style-type: none"> • a person who is enrolled on the roll of the Supreme Court of a State or Territory or the High Court of Australia, as a legal practitioner (however described) • a judge of a court • a magistrate • a chief executive officer of a Commonwealth court • a registrar or deputy registrar of a court • a Justice of the Peace • a notary public (for the purposes of the Statutory Declaration Regulations 2018) • a police officer • an authorised representative of the Australian Postal Corporation who is in charge of an office supplying postal services to the public • a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public • an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955) • an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 2018) • a finance company officer with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 2018) • an officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees • a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.