

## AUSTRALIAN PARTNERSHIP DISCLOSURE & DECLARATION FORM

FULL NAME OF PARTNERSHIP:

FULL NAMES OF ALL PARTNERS:

ADDRESS OF ALL PARTNERS:

Partnership declaration:

I, \_\_\_\_\_\_, declare that I am a partner in the above recorded partnership, and verify that the above information is a complete, true and accurate representation of the business. I additionally declare that information is not reasonably available through a partnership agreement, minutes of a partnership meeting, or other reliable and independent information relating to the business. As such, this disclosure certificate is made under the provisions of the AML/CTF Rules for verification purposes.

Full name (please print)

Signature

/\_\_/\_ Date

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