

**PARTNERSHIP AGREEMENT
ORDER FORM**

1. Name of Partnership: _____

2. Commencement Date: _____

3. Accountant's Details

(a) Company name: _____

(b) Address: _____

(c) Contact Name: _____

(d) Telephone No: _____

4. First Partner:

(a) Full Name: _____

(b) ACN (if applicable): _____

(c) Address: _____

(d) Names of Directors of Trustee Company (if applicable):

(e) Percentage of interest deemed to be held by First Partner (if applicable): _____

5. Second Partner:

- (a) Full Name: _____
- (b) ACN (if applicable): _____
- (c) Address: _____

- (d) Names of Directors of Trustee Company (if applicable):

- (e) Percentage of interest deemed to be held by Second Partner (if applicable): _____

6. Third Partner:

- (a) Full Name: _____
- (b) ACN (if applicable): _____
- (c) Address: _____

- (d) Names of Directors of Trustee Company (if applicable):

- (e) Percentage of interest deemed to be held by Third Partner (if applicable): _____

7. Specific Requirements (if not standard):

Manager / Agent (if applicable):

Other:

8. State of Applicable Law:

Please note that, subject to other instructions received and advice provided, these requirements will be incorporated into the Pointon Partners standard form partnership of trust agreement.

Please insert specific requirements to be included either below or in an attachment to this instruction sheet.

Please note that the agreements to be provided include clauses that cover a range of legal issues that may be dealt with in a number of ways. The clauses included are our standard clauses that are not the only method of handling various issues but are our initial recommended position on a generic basis. A more particularised breakdown of the issues can be provided on request.

Pointon Partners

