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Credit Card Details					W	ww.co	rpora	teexpre	ess.com	.au	×
□ Visa □ Master Card □ American Express * American Express cards will attract a 1.75% surcharge ABN 35 115 087 520							U				
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Card Number:				_	S	uite 50	6, 267	' Castler	reagh St		ш
Expiry Date:			\$862	2.00				y NSW 2			
Signature:						Tele	phone	(02) 92	261 2100)	S
					ad	dmin@	corpo	rateexpi	ress.con	n.au	S
Disclaimer - We do not provide legal, accounti legal or other liabilities which may arise from t and accounting advice in relation to your affair	he work \	we perfor	m on your i	nstruction							on,
Company Incorporation C	rder	Form	ı – Limi	ted b	y C	Gua	ran	tee			
TICK WHERE APPLICABLE											
For Outsourcing Clients: Annual Reviews to be prepared by Corporate Expres	ss? [□ Yes	□ No								
Your Details (who should be contacted for further de	etails)										
By completing this form you agree to the trading and acknowledge that Corporate Express will ac									orateexp	oress.c	com.au
Name/Company/Firm			Referred by .								
Contact Em	ail										
Delivery Address (no PO Box)											
Phone	Fax										
Company Structure			d by Guarant – (Appropri a			tus if r	equire	e d)			
Common Seal	☐ Rubber Common Seal ☐ Self Adhesive Common Seal ☐ No Seal										
State of Incorporation	□ NSW		□ SA □ WA	□ T □ A			□ VI				
Name and number of prior association if any											
Date of current financial year end											
COMPANY DETAILS											
Preferred Company Name											
Has this name already been reserved?	☐ Yes	□ No	If yes, nam	ne of perso	on/co.	reserv	ed by				
Registered Office											
-											
Will the company occupy these premises?	☐ Yes	□ No	if no, the o	ccupier is.							

Principal Place of Business

OFFICE HOLDERS AND MEMBERS

Full Name				Date of Bi	rth			
ACN	DIN	(Provid	de for Directors only	Place of Birth				
Address				Country/Sta	ate			
Suburb		State		Postcode				
Please Tick where applicable:	☐ Chairperson	□ Director	☐ Secretary	☐ Public Officer	☐ Member			
Full Name				Date of Bi	rth			
ACN	DIN	(Provi	de for Directors only	Place of Bi	rth			
Address				Country/Sta	ite			
Suburb		State		Postcode .				
Please Tick where applicable:	☐ Chairperson	□ Director	☐ Secretary	☐ Public Officer	☐ Member			
Full Name				Date of Bi	rth			
ACN	DIN	(Provid	le for Directors only	Place of Bi	rth			
Address				Country/Sta	ite			
Suburb		State		Postcode .				
Please Tick where applicable:	☐ Chairperson	☐ Director	☐ Secretary	☐ Public Officer	☐ Member			
Full Name				Date of Bi	rth			
ACN	DIN	(Provid	le for Directors only	Place of Bir	rth			
Address				Country/Sta	ate			
Suburb		State		Postcode .				
Please Tick where applicable:	☐ Chairperson	☐ Director	☐ Secretary	☐ Public Officer	☐ Member			
Full Name				Date of Bi	rth			
ACN	DIN	(Provid	le for Directors only	Place of Bi	rth			
Address				Country/Sta	ate			
Suburb		State		Postcode .				
Please Tick where applicable:	☐ Chairperson	☐ Director	□ Secretary	☐ Public Officer	☐ Member			

Full Name				Date of Bir	th			
ACN	DIN (Provide for Directors only			Place of Birth				
Address				Country/Stat	ie			
Suburb		State		Postcode				
Please Tick where applicable:	☐ Chairperson	☐ Director	☐ Secretary	☐ Public Officer	☐ Member			
Full Name				Date of Bir	th			
ACN	DIN	(Provide	e for Directors only	Place of Bir	th			
Address				Country/Sta	te			
Suburb		State		Postcode				
Please Tick where applicable:	☐ Chairperson	☐ Director	☐ Secretary	☐ Public Officer	☐ Member			
Full Name				Date of Bir	th			
ACN	DIN	(Provide	e for Directors only	Place of Bir	th			
Address				Country/Sta	te			
Suburb		State		Postcode				
Please Tick where applicable:	☐ Chairperson	☐ Director	☐ Secretary	☐ Public Officer	☐ Member			
Name of Auditor? Name								
Address								
Additional Information								
Please provide us with a copy of	the proposed objects	of the company						
The proposed number of member	s of the Board of Dir	ectors including	office-bearers is					
DIRECTORS CONSENT								
The Directors have consented in Corporate Express to act as ager				n Original Member C	Company and have asked			
Signed by:								
Print name			. Signature					

Standard terms

Please note our Constitutions for Limited by Guarantee Companies contain the following rules:

The amount of guarantee payable by a member on a winding-up is \$10.00 (clause 11(b))
Two members form a quorum for the purpose of a general meeting (clause 27(c) and clause 28)
The number of members required to demand a poll at any general meeting is five (clause 31(b))
Two directors form a quorum for the purpose of a directors meeting (clause 56)
The office-bearers of the company are the president, vice president and the honorary treasurer. Other members of the board are referred to as directors.
All office-bearers and other members of the board must be members of the company .
Should you require any changes to these standard terms please provide details below.

Details and information required to incorporate a company in Australia

1. Company name

- If you have reserved the company name, please attach a copy of the ASIC reservation advice.
- If you own identical business name, please provide the registration no. and state.
- Please provide company name the name availability is checked on ASIC website.
- Please note words such as trustee, trust and offensive words cannot be part of a company name.
- Your new ACN can be your company name eg A.C.N 000 111 222 Pty Limited

2. State of incorporation

- Please choose a state
- 3. Addresses of registered office and principal place of business
 - Please provide street addresses in Australia. Post office addresses will not be accepted.
 - Registered office address is where your corporate register will be kept. Therefore it can be at office address of your accountant or solicitor.

4. Officeholders - Directors and Secretaries

- Please provide full name. Initials will not be accepted.
- Please provide street addresses. Post office addresses will not be accepted.
- Please provide the city and country of birth. If born in Australia, please provide the city and state.
- For public companies, 3 directors and 1 secretary must be appointed. At least 2 directors and 1 secretary must reside in Australia.

5. Public officer

- This is an appointment under taxation legislation
- Please provide full name. Initials will not be accepted.
- A person can be appointed as director, secretary and public office or can be just appointed as a public officer.

6. Members

- If the member is a person, please provide full name. Initials will not be accepted.
- If the member is an Australian company, please provide company name, ACN and registered office address.

7. Financial year end -

Please provide the year end date of the financial year

Disclaimer

We do not provide legal or accounting advice and therefore take no responsibility for your taxation, legal or other liabilities which may arise from the work we perform on your instructions. We urge you to first obtain legal and accounting advice in relation to your affairs.

CONSENT TO ACT AS DIRECTOR

1.	I hereby consent to act as a director of the company called
2.	For the purposes of sections 201D and 201L of the Corporations Act 2001, I give notice of the following personal details:
	Full Name:
	Address:
	Position Held:
	Former Names:
	Date of Birth:
	Place of Birth:
3.	In accordance with section 191 of the Corporations Act 2001, I declare that I am an officer or member of the undermentioned bodies corporate and/or firms, and should be regarded as interested in any contract which may be made with any such body corporate or firm:
	Name Name and Extent of Interest

4.		E the Corporations Act 2001, I declare that I am e following contracts or proposed contracts with the
	Name	Name and Extent of Interest
		in paragraph 3 above, paragraph 4 need not be osed contract is with a body corporate or firm
5.		sess the undermentioned property whereby duties or r indirectly in conflict with my duties or interests as
	Office or Property	Nature, Character and Extent of conflict
6.	I am not entitled to have an altern address in accordance of the Corpora	native address substituted for my usual residential ations Act 2001.
SI	GNED	
DA	ATED	