

## Chapter 7 of the Corporations Act 2001

The Certificate must be completed by a qualified Accountant if the Person is to be classified as a wholesale client under section 761G(7)(c) of the Corporations Act 2001.

### Clients Details

Full Name: .....

Address: .....

Email: .....Phone: .....

### Accountant Details

I certify that the Person whose details are set out above:

- has net assets of at least A\$2.5 million; or
- has a gross income for each of the last 2 financial years of at least A\$250,000.

I belong to: .....

[ name of professional body ]

### List of Qualified Professional Bodies

Professional Body	Declared Membership Classifications
The Institute of Chartered Accountants in Australia	CA, ACA and FCA
CPA Australia	CPA and FCPA
Institution of Public Accountants (IPA)	AIPA, MIPA and FIPA
Eligible foreign professional bodies <ul style="list-style-type: none"> <li>• Institute of Chartered Accountants of New Zealand</li> <li>• The American Institute of Certified Public Accountants</li> <li>• Canadian Institute of Chartered Accountant</li> <li>• Association of Certified Chartered Accountants (United Kingdom)</li> <li>• The Institute of Chartered Accountants in England and Wales</li> <li>• The Institute of Chartered Accountants in Ireland</li> <li>• The Institute of Chartered Accountants in Scotland</li> </ul>	Under ASIC's declaration a person is also a qualified accountant if they are a member of one of the eligible foreign professional bodies listed and they: <ul style="list-style-type: none"> <li>• have at least three years' practical experience in accounting or auditing, and</li> <li>• are only providing a certificate for the purpose of ss(8)708(c) and 761G(7)(c) of the Corporation act to a person who is resident in the same country (other than Australia) as the investor.</li> </ul>

My membership designation from this professional body is: .....

I am bound by this professional body's continuing professional educational requirements.

I acknowledge this certificate is valid for 2 years from the date of issue.

### Accountant

Full Name: .....

Address: .....

Signature: .....

Date certificate issued: .....

Please return the completed certificate to [pro@thinkmarkets.com](mailto:pro@thinkmarkets.com)

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