



## PLEASE FILL IN YOUR PERSONAL DETAILS

Name:

Email:  Company name:  Company location:						
PLEASE FILL IN DETAILS OF YOUR AGGREGATOR/FRANCHISOR/LENDER						
AGGREGATOR/ FRANCHISOR/ LENDER	TOTAL \$ VALUE OF LOANS - 2011/12 FINANCIAL YR	TOTAL NO. OF LOANS - 2010/11 FINANCIAL YR	AGGREGATOR/ FRANCHISOR/ LENDER CONTACT NAME	AGGREGATOR/ FRANCHISOR/ LENDER CONTACT PHONE NUMBER	AGGREGATOR/ FRANCHISOR/ LENDER CONTACT EMAIL ADDRESS	AGGREGATOR/ FRANCHISOR/ LENDER SIGNATURE

Contact number:

Please fax this form, and any relevant confirmation letters, to us by Monday 24th September.

Fax: 02 9439 4599

<sup>\*</sup> settled amount only

<sup>\*\*</sup> we will also accept individual letters from each of your aggregators/lenders/franchisors confirming sales volumes and no. of loans settled.