## **Cash Passport encashment authorisation**

Automated cash outs can now be processed online at cashpassport.com.au and funds will be credited to your account within 3 to 5 business days. Exchange rates and fee will be displayed before completing the application.

Agent name Teachers Mutual Bank Limited		Consultant				
	Phone 13 12 21					
What are your personal deta	ails?					
Title Mr Mrs Ms Miss Other		Member no				
First names		Surname				
Street no. & name						
Suburb	State	Postcode				
Home phone	Work phone		Mobile phone			
Email address			Date of birth			
Card holder's mother's maiden name						
What are your encashment	requirements? (	this information is	compulsory)			
Please credit my bank account directly.						
Bank name		Account name	Account name			
Branch	BSB	Ассог	int no			
<b>Important:</b> You must <b>ensure</b> that you provide cor account details you have provided. If you provide a						
What is the Cash Passport card nur						
			1			
Please sign below in black p	en only					
The exchange rates for the conversion of foreig proceeding with this authorisation, you agree to			and are subject to change without notice	e. By		
Mastercard Prepaid Management Services Aus	tralia Pty Ltd (ABN 47 14	5 452 044, AFSL 386 837)				
Platinum Mastercard® ("Cash Passport") in cor 404131). You should consider the Product Discl	osure Statement for the (	Cash Passport available at	www.cashpassport.com.au before deci	iding to		
acquire the product. Any advice does not take is appropriate for you. The Target Market Deter	nto account your persona mination for this product	Il needs, financial circumst can be located at www.cas	ances or objectives and you should con hpassport.com.au.	isider if it		
<b>Commissions.</b> We charge you commission of 1 This commission is retained by the Bank.	% on the AUD equivalent	value loaded or re-loaded	on your Cash Passport™ Platinum Mast	tercard®.		
The Bank also receives from Mastercard Prepa amount loaded or re-loaded on to Cash Passpo during that calendar year.						
The Bank also receives a small amount for mark						
Mastercard <sup>®</sup> and the circles design are register		card International Incorpoi	rated.			
Cardholder's signature	Date					
Cash Amount						
Approval no						
Payment method		Returning this fo	rm			

Offic	Member no Operator no		FAX	(02) 9704 8251	
	Date actioned		@	fx@tmbank.com.au	
		Health Professionals Bank, Firefighters Mutua imited ABN 30 087 650 459 AFSL/Australiar			Pag

Teachers Mutual Bank Limited,

PO Box 77, Mt Druitt NSW 2770

Office use

Refund amount AUD