

## Partnership Agreement Checklist

☐ **PARTNERSHIP**

Partnership Name	
Partnership Business	
Registered Address (No. Street Name, Suburb, Postcode, Country)	
Commencement Date of Partnership (DD/MM/YYYY)  Leave blank if not yet determined	

☐ **PARTNERS**

Full Name OR Company Name & ACN OR Trustee Name	Address (No. Street Name, Suburb, Postcode, Country)	Interest in the Business (as a %) Total Must = 100%

☐ **ACCOUNTANT**

Do you have an Accountant?	Y/N
Full Name	

<b>Firm Name</b>	
<b>Address (No. Street Name, Suburb, Postcode, Country)</b>	

☐ **BANKER**

<b>Do you have a Banker?</b>	<b>Y/N</b>
<b>Bank Name</b>	

☐ **JURISDICTION**

<b>Which State/Territory laws apply?</b>	
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