

CHANGE OF DISTRIBUTION OPTION REQUEST

Fund Name:

1. Investor Details

Investor Name:

Investor Number:

Contact Details

Contact name:

Contact phone:

Contact email:

2. Distribution Option

Please tick ONE option.

Reinvest

Direct Credit

Please provide bank details below

This change will be applied to your holding effective from the date when this request was received by Link Fund Solutions.

3. Bank Account Details

Unless you advise us otherwise the following bank details will become default bank details for all distribution payments and any future withdrawals (and will overwrite any bank details that we currently have in our records).

Bank

Branch Name

BSB

Account Number

Account Name

4. Authorisation

I/we instruct Link Group to effect this request in accordance with the completed instructions set out above. I/we acknowledge that any personal information I/we provide to Link Group will be collected and handled in accordance with Link Group's privacy policy, a copy of which can be found at <https://www.linkgroup.com/> or posted / emailed to us if we contact Link Group on (02) 8767 1114. By submitting this form or any other paperwork relating to my/our investment I/we consent to my/our personal information being collected and handled by the unit registry in accordance with that policy.

Signature

Signature

Print Name

Print Name

Title (circle)

Individual / Sole Director/
Director/ Trustee

Title (circle)

Individual / Sole Director/
Director/ Trustee

Date

Date

Please note it's up to the investor to ensure Link Group have been notified of authorised signatories on this account. Where we cannot match the signature to the initial application form or signatory list provided there maybe delays in processing of this request.

Please return the completed form to:

- scan and fax this request to (02) 9221 1194 or
- Please post this completed form to:

Link Group

Attention: Unitholder Services

Locked Bag 5038

Parramatta NSW 2124