DISTRIBUTION PAYMENT ELECTION

Please complete this form if you wish to notify One Registry Services of a distribution payment election.



Please type or print using a <u>black</u> pen and print in <u>CAPITAL</u> letters inside the boxes. Photocopies or faxed instructions will not be accepted.

A Inv	estor Details		
	Trust in which ent is held		
Register	ed Account Name		
Registere	ed Address		
	Suburb	State	Postcode
Unithold	ler Number/Investment Profile ID		
B Dis	tribution Election		
Please m	nark box with a cross to indicate on how yo	ou wish to receive any distributi	on (if applicable).
Pay income to the Bank, Building Society or Credit Union account on file.			
	Pay income to the Bank, Building Society or Credit Union account shown in Section C of this form.		
	Reinvest all income.		
C Dir	ect Credit of Payments		
made. A	etails of your Account, Australian Financial detailed payment advice will be provided will remain in effect for all direct credit pa	l for each payment. Please be a	dvised that this nominated bank
Account	name must match the name of the registor	ered holding.	
Account	Name		
BSB		Account Number	
Name of Institutio	Financial on		
Branch S	uburb/Town		

Signature of Individual / Director / Sole Director (Please delete as applicable) Signature of Individual / Director / Secretary (Please delete as applicable) Name

Date

(dd/mm/yyyy)

Important Information

Date

(dd/mm/yyyy)

Individual: This form is to be signed by the security holder.

Sign Here - This section <u>MUST</u> be completed

Joint Holding: Where the holding is in more than one name, all of the security holders must sign.

Power of Attorney: To sign under Power of Attorney, you must have already lodged this document with the registry. If

you have not previously lodged this document for notation, please attach an original certified copy of the Power of Attorney to this form when you return it. When signed under Power of Attorney, the attorney states that they have not received a notice of revocation. One Registry Services needs to

sight a certified copy of the Power of Attorney.

Companies: This form must be signed by either 2 Directors or a Director and a Company Secretary. Alternatively,

where the company has a Sole Director and, pursuant to the Corporations Act, there is no Company Secretary, or where the Sole Director is also the Sole Company Secretary, that Director may sign alone and is required to complete the warranty stating that there is no Company Secretary by

completing their name in full.

Privacy Clause: One Registry Services Pty Ltd (ABN 69 141 757 360) advises that Chapter 2C of the Corporations Act 2001 requires information about you as a security holder (including your name, address and details of the securities you hold) to be included in the public register of the entity in which you hold securities. Information is collected to administer your security holding and if some or all of the information is not collected then it might not be possible to administer your security holding. Your personal information may be disclosed to the entity in which you hold securities. You can obtain access to your personal information by contacting us at the address or telephone number shown on this form. Our privacy policy is available on our website www.oneregistryservices.com.au.

Sending your form

All correspondence posted to:

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T: +61 2 8188 1510

E: <u>info@oneregistryservices.com.au</u> www.oneregistryservices.com.au