

**COMMUNICATION FORM**

**Investor Details**

Please list your Investment Name and Securityholder Reference Number (SRN) below:

Name \_\_\_\_\_  
 SRN **U** \_\_\_\_\_

**Contact Details**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_  
 Email Address \_\_\_\_\_

**Communication Preferences**

Please indicate if and how you would like to receive the following (please tick one for each row):

Unitholder statements and communications       Email       Post  
 Annual Financial Reports for the Group       Email       Post       None

**Distribution Payments**

*You are required to provide your bank details for payment of distributions. Distributions will not be made by cheque.*

Account Name \_\_\_\_\_  
 Financial Institution \_\_\_\_\_  
 BSB \_\_\_\_\_ Account Number \_\_\_\_\_

*Please provide your TFN, ABN or exemption details below. While it is not compulsory to provide this information, by not providing it, tax may be withheld from taxable distribution payments at the highest marginal rate.*

TFN \_\_\_\_\_ ABN \_\_\_\_\_

**Sign Here – This section must be signed for your instructions to be executed**

I/We request you to amend the abovenamed investor's records to reflect the information provided above. I/We acknowledge that these instructions superseded and have priority over all previous instructions in respect to my/our securities. (Instructions detailing who is required to sign are included overleaf.)

Individual or Securityholder 1	Securityholder 2	Securityholder 3
Director	Director/Company Secretary	Sole Director and Sole Company Secretary

Date \_\_\_\_\_

Please email this form back to [info@pelathon.com](mailto:info@pelathon.com) or mail to PO Box 605 Neutral Bay NSW 2089

**INSTRUCTIONS FOR SIGNING**

Individual:	This form is to be signed by the securityholder.
Joint Holding:	Where the holding is in more than one name, all of the securityholders must sign.
Power of Attorney:	To sign as Power of Attorney, you must have already lodged it with the registry. Alternatively, attach a certified photocopy of the Power of Attorney to this form.
Companies:	Director, Company Secretary, Sole Director and Sole Company Secretary can sign. Please indicate the office held by signing the appropriate space.

**PRIVACY STATEMENT**

The personal information in this form is collected by Pelathon Funds Management Limited ("Pelathon"), as registrar for the issuer of the securities you hold.

Pelathon's privacy policy can be viewed on our website ([www.pelathon.com](http://www.pelathon.com)). Pelathon operates under the AFSL: 477840 and is located at Suite 1, 207 Ben Boyd Road Neutral Bay NSW 2089.

Your personal information is required for administration of the register of securityholdings. Should some or all of the requested information not be provided, correct administration of your securityholding may not be possible. Your personal information may be disclosed to the issuer of the securities you hold, its or our related bodies corporate, external service companies such as print or mail service providers or otherwise as permitted by law. If, in accordance with the provisions of the Corporations Act the issuer of the securities you hold approves, you may be sent marketing material in addition to general corporate communications. You may elect not to receive marketing material by contacting Pelathon Funds Management Limited.

You can obtain access to your personal information and (if required) advise of any incorrect, inaccurate or out of date data information held, by contacting Pelathon Funds Management Limited on 02 9098 9100.