

Company or Trust in which Investment is Held

All Correspondence to:

Boardroom Pty Limited
Level 7, 207 Kent Street Sydney NSW 2000
GPO Box 3993 Sydney NSW 2001Full Name(s) of
Registered
HoldingRegistered
Address
In Australia
Phone 1300 737 760 Fax 1300 653 459
International
Phone +61 2 9290 9600 Fax +61 2 9279 0664
Email corval@boardroomlimited.com.auYou are required to insert this number
Securityholder Reference Number (SRN) or
Holder Identification Number (HIN)

Post Code

Direct Credit Facility

This form must be forwarded to Registries Limited.

Use a black pen. Print in **CAPITAL** letters inside the boxes**A Request for Direct Crediting of Payments**

Please credit all cash payments from the above holding directly to our account at the following Australian financial institution:

Account Number

BSB Number

Name in which account is held (eg: John Smith)

Name of Australian bank or financial institution

Name of branch or suburb or town

Type of account (eg: cheque, savings)

**DO NOT USE YOUR CARD NUMBER**

If you are unsure of your account or BSB number, please check with your bank, building society or credit union.

Contact Name

Telephone Number - Business Hours

Telephone Number - After Hours

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

I/We authorise you to act in accordance with my/our instructions set out above. I/We acknowledge that these instructions supersede and have priority over all previous instructions relating to payments to which I/we am/are entitled to be paid in cash, but do not override any previous Reinvestment Plan instructions.

Individual or Securityholder 1

Securityholder 2

Securityholder 3

Sole Director and
Sole Company Secretary

Director

Director/Company Secretary

Day Month Year

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 in the appropriate space.