

PLEASE SEND COMPLETED FORM TO OUR UNIT REGISTRY VIA EMAIL, FAX OR MAIL:

By Post  
PM Capital Limited  
c/- Apex Fund Services  
GPO Box 4968 Sydney NSW 2001

By Email:  
registry@apexgroup.com  
By Fax: +612 9251 3525

Further Information:  
Contact Apex Fund Services  
T: 1300 133 451 (Australia only)  
T: +612 8259 8888 (International)



# Change of Details Form

Please note this form can be completed electronically or printed. In both circumstances a written signature is required.

## 1. INVESTOR DETAILS

Investor number	
-----------------	--

Investor A – Individuals, Joint Investors or Trustees

Title	Given name(s)	Surname
-------	---------------	---------

Investor B – Joint Investors or Trustees

Title	Given name(s)	Surname
-------	---------------	---------

Company, Trusts and Superannuation Funds

Account name	
--------------	--

Primary Contact

Contact name	
--------------	--

Phone number	
--------------	--

## 2. NEW CONTACT DETAILS

Complete this section to change contact details.

Street address/PO Box	Suburb	
Country (if not Australia)	State	Postcode
Phone (H)	Phone (W)	Mobile
Facsimile	Email	

## 3. PREFERRED METHOD OF COMMUNICATION FOR YOUR ACCOUNT INFORMATION

Including investment confirmations, distribution statements and Fund reports.  Post  Email

## 4. NEW DISTRIBUTION OPTION

Complete this section to change your distribution option.

This will apply to all Funds unless special instructions are supplied.

Reinvest  Pay to bank account nominated in Section E

## 5. BANKS ACCOUNT DETAILS

Complete this section to change your bank account details and/or if you choose to 'pay to bank account' in Section E.

Only Australian financial institution account details will be accepted. The bank account must be in the same name(s) as the investor(s).

Bank/Institution	Branch	BSB
Account name	Account no.	

## 6. DECLARATION AND SIGNATURES

I/We declare that all the details provided on this Form are true and correct.

Signature		Signature	
Name		Name	
Date		Date	
<input type="checkbox"/> Director <input type="checkbox"/> Secretary <input type="checkbox"/> Sole Director <input type="checkbox"/> POA		<input type="checkbox"/> Director <input type="checkbox"/> Secretary <input type="checkbox"/> Sole Director <input type="checkbox"/> POA	

Joint Applicants must both sign. Company Applications must be signed by either two Directors, a Director and Secretary or the Sole Director of the Company. If this Form is signed under a Power of Attorney it must be accompanied by a certified copy of the Power of Attorney.