## **Redemption request**

Fund name			
Class or series			
1 Investor details			
Investor name			
Investor number			
Contact name		Contact phone	
Contact email			
2 Redemption amount (please select one)			
Full redemption – please proceed to the next section 3			
Partial Redem	ption – please complete one of the	e following: Amount to red	deem AUD
		Units to red	deem Units
3 Payment of Redemption Proceeds (please select one only)			
Pay into the account previously advised – please proceed to the next section 4			
Pay redemption proceeds into following account – please provide details below			
Bank			
Branch name			
BSB		Account number	
Account name			
4 Authorisation			
Signature		Signature	
Print name		Print name	
Title (circle)	Individual / Sole Director / Director / Trustee	Title (circle)	Individual / Sole Director / Director / Trustee
Date		Date	

Please return this form to the registrar of the issuer.