Redemption request

Fund name			
Class or series			
1 Investor detail	s		
Investor name			
Investor number			
Contact name		Contact phone	
Contact email			
Partial Redemption – please complete one of the following: Amount to redeem Units to redeem Units			
3 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.