

Balmain Fund Administration Limited

Change of Details Form

PLEASE USE BLOCK LETTERS TO COMPLETE THIS FORM

Please complete this form and send to: Balmain Funds, C/- GPO Box 4968, Sydney NSW 2001 Fax: (02) 9251 3525

1. Investor Details

Investor Account Number

Investor 1

Title

Given Name

Surname/Company/Partnership Name

Investor 2

Title

Given Name

Surname/Company/Partnership Name

2. Change of Address

PO Box / RMB / Locked Bag / Care of (C/-) / Property Name / Building Name (if applicable)

Unit No./Level

Street No.

Street Name

Suburb

State

Postcode

Work Phone

Home Phone

Mobile Phone

Email

3. Change to Distribution Instructions (complete only if changes are applicable)

Please refer to the relevant Product Disclosure Statement regarding distribution payment periods and options.

Please reinvest (where applicable); or

Direct credit to the following bank account details:

Australian Financial Institution

BSB Number (Bank/State/Branch) Account Number

Account Name

Branch Suburb/Town

4. Advice of Tax File Number (TFN)

Investor 1 Name

TFN

Tax Exemption Code (if required)

Investor 2 Name

TFN

Tax Exemption Code (if required)

5. Change of Financial Adviser

Adviser Group

Adviser Name

Phone

6. Signature (complete only if changes are applicable)

Investor 1 or Company Name

Signature

Date

D	D	/	M	M	/	Y	Y	Y	Y
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Investor 2 or Company Name

Signature

Date

D	D	/	M	M	/	Y	Y	Y	Y
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If an investment is held by an individual applicant, the form must be signed by that individual. If an investment is held jointly, the form must be signed by both applicants, unless otherwise specified on the original Application Form. If you are signing this form under a power of attorney previously supplied, you are verifying that, at the time of signing, you have not received notice of revocation of that power.