

## Forms booklet

**Issue date:** 5 October 2021 **Responsible Entity and Issuer:** 

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# A step-by-step guide for completing the application form

The following information is a guide to assist you in completing the application form for investment in the IOOF MultiMix Trusts (collectively referred to throughout this forms booklet as 'MultiMix' or 'Trust(s)').

### Before you start:

**New investors** – only applicants wishing to apply for a **new investment** in MultiMix must complete the application form. If you are an existing investor in one or more of the Trusts, you will generally not be required to complete the application form again, unless you are investing in a different name/capacity to your existing investment. See below instructions for existing investors.

**Existing investors** – wishing to apply for additional investments to their MultiMix investment please complete the Additional investment instruction form located on page 27.

Existing investors – wishing to apply to switch (in part or in full) their investments from one Trust to another, please complete the switching instruction form located on page 31.

New investors will generally be required to complete all STEPS of the application form, except:

**Step 2** – which only requires certain sections completed depending on the type of investor you are

**Step 7** – which is optional.

Further information to help you complete each STEP is detailed below.

## Step 1 – New investment application

- The application form is to be completed for new investments in MultiMix only. Proof of identification must also be provided if you are a new investor to the IOOF group<sup>1</sup>. See Step 5 for further details.
- If you are an existing investor in any product within the IOOF group, please provide your investor or account number in this section.

Generally, existing investors who hold investments in other products within the IOOF group will not be required to complete the client identification and proof of identity requirements under *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act), unless they are applying

for investment under a different name to their existing accounts (eg as a trustee for a trust, or director of a company).

### Step 2 - Investor details

 You will need to select which investor type you are applying as to identify which part of Step 2 you will need to complete. If you are applying as:

**Individual or Joint Investors** (or those investing as a Sole Trader) – Complete **PART A** 

Companies - Complete PART B

Trusts<sup>2</sup> – Complete PART C

Other<sup>3</sup> – Complete PART B (a), (b) & (h) only

**Note** – If you have an adviser, the relevant FSC/FPA Identification Form will need to be completed for **Companies** and **Trusts** or those applying under the **Other** investor category and the FSC/FPA identification form for individuals will need to be completed in relation to the beneficial owners of the entity.

If you do not have a financial adviser you will need to complete an Additional Tax Information Form. The applicable forms can be obtained via our website www.ioof.com.au, or by contacting Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

- Please complete your name and address details as requested in the appropriate PART of Step 2.
- For non-resident investors, we will assume that all necessary government approvals have been obtained.
- You may nominate a password to allow easy access to your account information via the telephone.

Please be aware that where an investor is not an individual (for example, a company or trust) or where a representative is nominated, no account information will be provided via the telephone unless this password is quoted.

The following table provides examples to assist you in completing the investor details sections of Step 2, including who will need to sign the declaration. Note, all required sections of the application form need to be completed. The table on the following page provides the basic investor sections as an example.

<sup>1</sup> Additional client identification requirements may apply depending on the type of investor applying. Note for new applicants, certified copies of supporting proof of identity documents are to be returned with your Application Form. See Step 5.

<sup>2</sup> **Trusts** may include Trust with Corporate or Individual Trustees, Family or Charitable Trusts, Deceased Estates or accounts set up for a Minor Child.

Other investors may include Partnerships, Associations (such as Incorporated/Unincorporated Club/Body), Registered Co-operatives, or Government Entities.

#### Investor details example

Investor Type	Example of investor details	Who signs Step 8?
Part A: individual or joint in	nvestors	
Individual Investor	Investor 1: Mr John Smith	Signatory 1: John Smith
Joint Investors <sup>4</sup>	Investor 1: Mr John Smith Investor 2: Ms Mary Smith	Signatory 1: John Smith Signatory 2: Mary Smith
Part B: companies (Note, 'OTHER INVESTOR' t	ypes must complete sub-sections (a), (b) and (h) of	PART B only)
Company	<ul> <li>(a) Company Details         Registered Name of Company/Entity –         XYZ Pty Ltd</li> <li>(b) List Directors         Director 1 – Mr Joe White         Director 2 or Company Secretary – Mr Frank Jones</li> <li>(h) Contact person<sup>5</sup>: Mr Joe White</li> </ul>	Signatory 1: Joe White (Company Director)  Signatory 2: Frank Jones (Second Company Director or Company Secretary if applicable)  Common seal required where applicable.
Incorporated/ Unincorporated Club/Body (Other investor type)	<ul> <li>(a) Name of company/entity         The District Bowls Club</li> <li>(b) List Directors         Director 1: Mr Fred Brown (Office holder)         Director 2: Mr James White (Second Office holder)</li> <li>(h) Contact Person<sup>5</sup>: Mr Fred Brown</li> </ul>	Signatory 1: Fred Brown (Office holder) Signatory 2: James White (Second Office holder)
Part C – trusts <sup>6</sup>		
Trust with a Corporate Trustee	<ul> <li>(a) Full Name of Trust  ABC Superannuation Fund</li> <li>(b) Full business name of the Trustee  ABC Pty Ltd</li> <li>(e) Details of Trustee/Contact Person  i - Corporate Trustee - ABC Pty Ltd  Contact Person<sup>5</sup>: Mr David Black</li> </ul>	Signatory 1: David Black (Company Director) Signatory 2: Tim Parker (Second Company Director or Company Secretary if applicable)
Trust with Individual Trustees	<ul> <li>(a) Full Name of Trust     Smith Superannuation Fund</li> <li>(b) Full Business Name of the Trustee     N/A</li> <li>(e) Details of Trustee(s)/Contact Person     i – Individual Trustee(s)     Trustee 1<sup>4</sup>: Mr John Smith     Trustee 2: Mrs Mary Smith     Trustee 3: Ms Helen Smith     Trustee 4: Mr Frank Smith</li> </ul>	Signatory 1: John Smith (Trustee 1) Signatory 2: Mary Smith (Trustee 2) Signatory 3: Helen Smith (Trustee 3) Signatory 4: Frank Smith (Trustee 4)
Deceased Estate (Other Trust type)	<ul> <li>(a) Full name of Trust         The Estate of Ms Mary Smith</li> <li>(d) Other Trust Type – Deceased estate</li> <li>(e) Details of Trustee(s)/Contact Person         ii – Individual Trustee(s)         Trustee 17: Mr Robert Brown (Executor 1 of estate)         Trustee 2: Mrs Mary Brown (Executor 2 of estate)</li> </ul>	Signatory 1: Robert Brown (Executor 1 of estate) Signatory 2: Mary Brown (Executor 2 of estate if applicable)

The Responsible Entity is unable to accept investments by persons under the age of 18 years. Applications in respect of minors should be made by a parent or guardian. For investment on behalf of a minor, please complete PART C and select 'Other Trust Type'. The investment may be titled 'Name of parent/guardian' account for 'Name of minor' to be inserted under 'Full name of the Trust'.

<sup>4</sup> All correspondence will be forwarded to the address of Investor 1.

<sup>5</sup> All correspondence regarding the account will be sent to the 'contact person'. The contact person must be one of the signatories on the account.

 $<sup>6 \</sup>quad Trusts \ may \ include \ Trusts \ with \ Corporate \ or \ Individual \ Trustess, Other \ Trusts \ such \ as \ Family, Charitable \ Trusts, Deceased \ Estates \ or \ accounts \ set \ up \ for \ a \ Minor \ Child.$ 

<sup>7</sup> Trustee 1 must be nominated as the Identified Trustee (applicable for Trusts with Individual Trustees). All future correspondence will be sent to Trustee 1. The Identified Trustee must be one of the signatories on the account.

## Foreign Residents (including US residents or citizens) investor reporting requirements

The United States' (US) Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regimes legislated in a number of countries (including Australia) which require financial institutions, including IOOF, to identify and report information relating to investors who are a US resident or citizen and a resident of any other foreign jurisdiction for tax purposes. This information is required to be reported to the Australian Taxation Office and its overseas counterparts.

### Step 3: Initial investment details

- Please indicate the amount you would like to invest.
   The minimum initial investment amount for each Trust is \$25,000.
- Your investment may be made by cheque, BPAY or transfer from an existing IOOF investment or a combination of both options. If you are making the initial deposit by BPAY, a Customer Reference Number will be advised to you once your initial application has been received and an account has been set up. Cash cannot be accepted. Also ensure that you tick the appropriate box to indicate how you would like your distributions to be paid. Either:

Option A: Reinvested as additional units.

**Option B:** Deposited into your nominated Australian financial institution account.

If you choose Option B, you need to provide us with details of your Australian financial institution account.

If you do not nominate Option A or Option B, this will be taken as a direction to reinvest distributions as additional units in the Trust from which the income was derived (ie Option A)

Additional investments via BPAY®

- If you are an existing investor in a Trust, you may make an additional investment into that Trust using BPAY.
- If you wish to invest in a Trust in which you are not currently
  a unit holder, you will need to complete a new application
  form and send it to us, together with your cheque for the
  investment amount.
- To make additional investments using BPAY once your account has been established, you will need to have:
  - the Biller Code of the Trust (for further details, please see table below) and
  - your Customer Reference Number (CRN).

If you would like a CRN, please tick 'Yes' where required, in the application form or additional investment instruction form. If you already have a CRN, you do not need to complete an application form or an additional investment instruction form or provide us with any information to make an additional investment using BPAY. For further details on obtaining a CRN, see page 19.

Please contact your Australian financial institution to arrange BPAY through telephone or internet banking. Please note that BPAY is not available from all financial institutions.

Trust Name	B <sub>PAY</sub> Biller Code
IOOF MultiMix Capital Stable Trust	72223
IOOF MultiMix Conservative Trust	72470
IOOF MultiMix Moderate Trust	72249
IOOF MultiMix Balanced Growth Trust	72231
IOOF MultiMix Growth Trust	72488
IOOF MultiMix Cash Enhanced Trust	73015
IOOF MultiMix Diversified Fixed Interest Trust	73254
IOOF MultiMix Australian Shares Trust	73007
IOOF MultiMix International Shares Trust	72496

# Step 4: Tax File Number or Australian Business Number notification or exemption

- If you would like us not to deduct tax at the highest marginal tax rate plus Medicare Levy from your income distribution, please provide us with your Tax File Number (TFN), Australian Business Number (ABN) or exemption information.
- An investor who is not an Australian resident, or who
  otherwise seeks to claim an exemption for tax purposes,
  may not need to provide a TFN or ABN to prevent us from
  withholding tax at the highest marginal tax plus Medicare
  Levy. We recommend you see an accountant or financial
  adviser for further information. If you seek to claim an
  exemption on this basis, please provide us with information
  concerning why you are entitled to claim an exemption.

**Please note**, under AML/CTF legislation, disclosure of an ABN is required for those individual investors investing as sole traders. If applicable, please provide this information under **Step 2 – PART A**, the section headed "For Sole Traders Only".

### **Step 5: Proof of identity requirements**

In accordance with with the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act), new investors applying for financial products, such as the IOOF MultMix Trusts, are required to supply proof of identity documentation to verify the applicant.

- Step 5 lists the types of proof of identity documents which can be provided for individual investor applicants and persons who have been nominated as a Representative or Power of Attorney.
- For non individual investor applicants (such as companies, trusts and partnerships) investors will need to refer to the separate 'Completing Proof of Identity' document. A copy of this document can be obtained from our website at www.ioof.com.au or by contacting Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

### Step 6: Financial adviser details

- If you have appointed a financial adviser, your financial adviser needs to complete this section.
- Please note, if your financial adviser has already conducted the proof of identity check, the financial adviser must confirm having sighted and retained the necessary information on record by completing the 'Record of Proof of Identification' table in this Step, or attach a copy of the identification document to the Application Form. This table is only applicable for 'individual/sole trader' investors.

## Step 7: Representative facility (optional)

- If you wish to authorise another person to operate your account on your behalf, you need to complete this section.
- Please ensure you and your representative have read and understood the conditions relating to nomination of a representative outlined in the PDS, before completing this section.
- Both the investor(s) and the representative need to sign this section
- Note, nominated representatives must provide proof of identification documents, as detailed in Step 5.

### **Step 8: Applicant declaration**

- Please read the PDS in its entirety and then sign the applicant declaration section of the application form.
- We will not accept an application unless the correct signatory/signatories has/have signed this section (see Step 2).
- Please ensure that you also provide the necessary proof of identity documentation with your application form.
- If your application form is signed by your attorney, a
  certified copy of the relevant Power of Attorney, together
  with the necessary proof of identity documents for the
  Power of Attorney (as detailed in Step 5), must be enclosed
  with your application form.
- If joint investors are applying, all investors must sign.

#### Cheque and application details

Please complete your cheque made payable to 'IOOF Applications Trust Account – Applicant(s) Name' marked 'Not Negotiable'.

For example, if Robert Brown proposes to invest, the relevant cheque will be made payable as follows:

IISL Application Trust Account A/C Robert Brown.

Please send your completed application form and cheque(s) to:

IOOF Reply Paid 264 Melbourne VIC 8060

#### Additional investment instruction form

- If you are an existing investor in one or more of the MultiMix range of Trusts and wish to apply for additional investments into your existing Trust(s), you will need to complete the additional investment instruction form to indicate the amount you wish to invest into which existing Trust(s).
- Note, if you are not an existing unit holder in any Trust(s), you will need to complete an application form to apply for initial investments into the new Trust.
- For additional investments, the minimum investment amount is \$5,000 for each Trust.

#### Switching instruction form

- If you are an existing investor in one or more Trusts within
  the MultiMix range and wish to switch your investments
  from one Trust to another Trust, you will need to complete
  the switching instruction form to indicate the amount you
  wish to switch and from/to which Trust.
- The minimum switch amount is \$5,000. Note the minimum initial investment into any new Trust is \$25,000.

## ioof MULTIMIX TRUSTS



5 October 2021

## Application form

If you are investing in the Trusts via an Investor Directed Portfolio Service (IDPS) or master trust, you must complete the documents that the IDPS or master trust requires. **You do not need to fill out this form.** 

For assistance please contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

This application form accompanies the IOOF MultiMix Trusts Product Disclosure Statement (PDS) (and any Supplementary Product Disclosure Statement (SPDS)) that may be issued from time to time which provides important information about investing in the IOOF MultiMix Trusts (Trusts). We recommend you read the PDS (and any SPDS) thoroughly before applying to invest in the Trusts. We will only consider applications for initial investments on receipt of this application form, issued together with this PDS (and any SPDS).

If you have received the PDS (and any SPDS) electronically, we can send you a paper copy including this application form free of charge upon request. Simply contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

The investments offered in this PDS (and any SPDS) are only available to persons receiving the PDS (and any SPDS) and accepting the offer to invest within Australia or New Zealand. A person who gives another person access to the application form must at the same time and by the same means give the other person access to the PDS (and any SPDS). All words and phrases in this application form have the same meaning as given to them in the PDS (and any SPDS).

Please complete these instructions in BLACK INK using CAPITAL LETTERS (except for your email address) and ✓ boxes where provided.

## Step 1: New investment application

This application form is to be completed for new investments into the Trusts.	
If you are an existing investor with the IOOF group, please provide your investor/account number:	
<b>Note:</b> Generally existing investors who hold investments in other products within the IOOF group, will identification requirements under AML/CTF. unless they are applying under a different name to their e	1 1

or in a family company name) or in a different capacity to their existing accounts (eg as trustee for a trust, or director of a company).

The minimum initial investment amount is \$25,000 for each Trust you choose to invest in.

## **Step 2: Investor details**

You will need to complete certain sections of this application form depending on your investor type.

What part of Step 2 do you need to complete?

Complete <b>Part A</b> if you are:	Complete <b>Part B</b> if you are:	Complete <b>Part C</b> if you are:	Complete Part B (a), (b) and (h) only if you are:
an individual investor <sup>1</sup> or joint investors	a company	a trust with individual  Trustees or a trust with a corporate  Trustee or other trust <sup>2</sup>	other investor <sup>3</sup> then go straight to Step 3.
	financial adviser. If you do not have a finan	es will also need to complete the relevant 'FS cial adviser, an Additional Tax Information For vestor Services on 1800 002 217 (or +613 8614	m will need to be completed. For a copy

- 1 Individual investors include individuals acting for themselves or as sole traders.
- 2 Other trusts may include family or charitable trusts, deceased estates, or accounts set up for a minor child.
- 3 'Other investors' may include partnerships, associations (such as incorporated/unincorporated club/body), registered co-operatives and government entities.

## Part A – Individual/Joint Investors or Sole Traders

(a) Investor 1 (all notices a	nd c	orre	spor	nden	ice v	vill b	e fo	rwarc	ded	to th	ne ad	ddre	ss of	Inv	esto	r 1)											
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnam	ne																		
Given name(s)																											
This section must be comple	eted.	Not	e: PC	Э Вох	x car	n on	ly be	e prov	/ide	d be	elow	unc	der 'N	Иaili	ng a	addre	ess'.										
Residential address															1						1						
Suburb																Sta	ate				Pc	stcc	de				
Country Mailing address (if different from above)																											
Suburb																Sta	ate				Pc	stcc	de				
Phone (bh)													Pho	ne (	ah)												
Phone (mobile)														F	ax												
Email																											
Date of birth	D	D	/	М	М	/	Υ	Υ	Υ	Υ								Gen	der		М	ale			Fema	ale L	
Occupation																											
	rth Gender Male Female															l											
-				lialla			HILIL	1																			
Are you a politically exposed	l per	son?	,		∐ Ye □			No (																	om.	au)	
Are you residing overseas?					_l Ye	S		No (	If 'y	es', c	omp	lete	the	Ove	rsea	s Inv	estc	or Fo	rm a	t wv	vw.ic	of.c	om.	au)			
For Sole Traders	on	ly																									
Please also complete this	sect	tion	if yo	u are	e an	Indi	vidu	al Inv	esto	or ap	plyi	ng a	s a s	ole t	trade	er:											
Business name																											
(if applicable) Australian Business																											
Number (ABN)			_ [				_ [				_ [																
If different from residentia	al ad	ldres	s ab	ove.	PO I	Box	not a	accep	oted	l.																	
Business address																											
Suburb																Sta	te l				Pos	stco	de				
Country																											
Are you a tax resident of Aus	tralia	а?					⁄es		No	)																	
Are you a tax resident of ano	ther	cou	ntry	?			⁄es		No	)																	

Reason for no TIN (A,B or C)#

#### FOREIGN RESIDENTS ONLY – Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS)

TIN

Country

Under FATCA and CRS laws, we are required to ask all investors to provide additional information about their tax residency. Tax residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. This information will be reported to the relevant tax authority within Australia and internationally.

For all countries where you are a tax resident please provide a TIN (Tax Identification Number) which is the number assigned by each country for the purposes of administering tax laws such as a Social Security Number in the US. If a TIN cannot be provided, please list one of the three reasons specified below (A, B or C) for not providing a TIN.

#Reasons for not providing	g a T	IN																						
Reason <b>A</b> – The country of ta	ax res	sider	ncy (	does	not	issu	e TII	Vs to	tax	resic	dents	s, OF	2											
Reason <b>B</b> – You have not bee	en iss	sued	l witl	h a T	īN, C	DR																		
Reason <b>C</b> – The country of ta	ax res	sider	ncy c	does	not	requ	uire t	the T	TIN to	o be	disc	lose	d.											
Security Password																								
For security purposes and ea	asier	acce	ss to	you	ur ac	cour	nt in	form	natio	n via	the	tele	pho	ne, p	olea	se provide a	a pass	word	d:					
Security password																								
Please note: When a repres	enta	tive i	is no	min	ated	, no	acco	ount	info	rma	tion	will	be p	rovi	ded	via the tele	phon	ie un	less t	his p	oass'	word	is qu	oted.
(b) Investor 2 (for Joint Ir	nvest	ors (	only <sup>†</sup>	*)	7										1									
Title (Dr/Mr/Mrs/Ms/Miss)						ı	Su	ırnar	ne													<u> </u>	<u> </u>	
Given name(s)																								
This section must be comple	eted.	Not	e: PC	Э Во	x car	n on	ly be	e pro	vide	ed be	elow	unc	ler 'N	Mailii	ng a	nddress'.								
Residential address															1								$\perp$	
Suburb																State			Pos	tcoc	de L	<u></u>	<u></u>	
Country																							<u> </u>	
Mailing address (if different from above)																								
Suburb																State			Pos	tcoc	de [		$\perp$	
Phone (bh)													Pho	ne (a	ah)									
Phone (mobile)														F	ax								<u> </u>	
Email						1																		
Date of birth	D	D	/	М	М	/	Υ	Υ	Υ	Υ						Ger	nder		Ма	le L		Fei	male	
Occupation																								

	py a prominent public position or function in a govern definition also extends to their immediate family mem	-
Are you a politically exposed person?	No (If 'yes', complete the Politically Exposed Perso	ons Form at www.ioof.com.au)
Are you residing overseas?	No (If 'yes', complete the Overseas Investor Form	at www.ioof.com.au)
Are you a tax resident of Australia?	No	
Are you a tax resident of another country? Yes	No	
Please answer both tax residency questions as you Australia and no other country please proceed to	ou can be a tax resident of more than one country. If you see a tax resident of more than one country. If you	ou are only a tax resident of
FOREIGN RESIDENTS ONLY – Foreign Account To	ax Compliance Act (FATCA) and Common Reportin	ng Standard (CRS)
rules differ by country. Whether an individual is a tax	l investors to provide additional information about the resident of a particular country is often (but not alway n's residence or place of work. This information will be	s) based on the amount of time
· · · · · · · · · · · · · · · · · · ·	provide a TIN (Tax Identification Number) which is the Social Security Number in the US. If a TIN is cannot be viding a TIN.	
Country	TIN	Reason for no TIN (A,B or C)#
#Reasons for not providing a TIN		
Reason <b>A</b> – The country of tax residency does not iss	sue TINs to tax residents, OR	
Reason ${\bf B}$ – You have not been issued with a TIN, OR		
Reason ${\bf C}$ – The country of tax residency does not red	quire the TIN to be disclosed.	
Security Password		
·	unt information via the telephone, please provide a pa	assword:
Security password		

**Please note:** When a representative is nominated, no account information will be provided via the telephone unless this password is quoted.

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## Part B – Companies or Other Investors

If you are investing as a:										_																
Domestic Company, Australian Company at have a financial advise	nd th	heir	bene	efici	al ow	ners (							_													t
Foreign Company (d							ase co	mpl	ete a	all app	olica	able	sect	ions	of <b>F</b>	art	<b>B</b> , ir	ıcluc	ding	the	rele	/ant	FSC,	/		
FPA Identification form Information Form (if yo				_									-	ou h	ave	a fin	anci	al ac	d∨is∈	r) or	an A	∖ddit	tiona	al Ta:	X	
Other Investor⁴ as de																		-								
'								-																-		
																						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
a) Company/Entity de	mpany/entity alian Company per (ACN)  Salian Registered Body per (ARBN) (if applicable)  OR  OR  OR  OR  Sign registration number^ degistered in Australia) tered business  Sess																									
Registered name of company/entity																										
Australian Company Number (ACN)	alian Company over (ACN)  Ilian Registered Body over (ARBN) (if applicable)  OR  OR  OR  or registration number^ egistered in Australia)  overed business																									
Australian Registered Body Number (ARBN) (if applicable)	ber (ACN)  alian Registered Body ber (ARBN) (if applicable)  gn registration number^ registered in Australia)  stered business ess																									
Foreign registration number^ (if unregistered in Australia)	alian Company per (ACN)  Alian Registered Body per (ARBN) (if applicable)  OR  OR  OR  OR  OR  OR  OR  OR  OR  O																									
Registered business address		L	<u> </u>																	1						
Suburb	tered Body (if applicable)  OR  tion number^ in Australia) iness  OR															L										
Country	L																			L						
rincipal business address f different from above)																										
Suburb															Sta	ate				Ро	stco	de				
Country																										
ndustry in which company operates																										
(b) Please list Director	s/O	ffic	eho	old	ers/	Partı	ners	full	naı	mes	(as	s ap	pli	cak	ole)											
Director/Officeholder/Part	ner	1			7																					
itle (Dr/Mr/Mrs/Ms/Miss)							Surna	me																		
Given name(s)																										
Politically exposed persons a organisation, either within or																	_								l	
Are you a politically exposed	per:	son?	<b>)</b>		Yes		No (I	f 'yes	', cor	mplet	te th	ne Po	olitic	ally	Ехро	osed	Pers	sons	Forr	n at	WW	w.io	of.co	m.a	u)	
Are you residing overseas?					Yes		No (I	f 'yes	, cor	mplet	te th	ne O	vers	eas	Inve	stor	Forr	n at	ww	w.io	of.co	m.aı	u)			
Director/Officeholder/Part	ner	2																								
itle (Dr/Mr/Mrs/Ms/Miss)							Surna	me																		
Given name(s)																										
Politically exposed persons a organisation, either within or																	_				-				l	
Are you a politically exposed	per:	son?	)		Yes		No (I	f 'yes	', cor	mplet	te th	ne Po	olitic	ally	Ехр	osec	l Per	sons	s For	m a	twv	/w.ic	of.c	om.a	au)	
Are you residing overseas?					Yes		No (I	f 'ves	′, cor	mplet	e th	ne O	vers	eas	Inve	stor	Forr	n at	ww	w.io	of.cc	m.aı	u)			

<sup>4</sup> **Other investors** may include partnerships, associations (such as incorporated/unincorporated club/body), registered co-operatives, government entities.

Director/Officeholder/Partner	3																							
Title (Dr/Mr/Mrs/Ms/Miss)						Surna	me																	
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organisation, either within or ou															_				-					
Are you a politically exposed per	rson?			Yes		No (	If 'yes	', compl	ete t	he P	olitio	ally	Ехро	osed	l Per	sons	s For	m at	twv	vw.ic	of.c	om.a	au)	
Are you residing overseas?				Yes		No (	If 'yes	', compl	ete t	he C	)vers	eas	Inve	stor	Forn	n at	WW'	w.iod	of.cc	m.a	u)			
Director/Officeholder/Partner	4																							
Title (Dr/Mr/Mrs/Ms/Miss)						Surna	me																	
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organisation, either within or ou	tside	Aust	ralia	. This	s defi	nition	also	extends	to t	heir i	mm	edia	te fa	mily	mei	mbe	ers a	nd cl	lose	assc	ciate	es.		
Are you a politically exposed per	rson?			Yes		No (	lf 'yes	', compl	ete t	he P	olitic	ally	Ехро	osed	l Per	sons	s For	m at	t wv	vw.ic	of.c	om.a	au)	
Are you residing overseas?	Yes No (If 'yes', complete the Overseas Investor Form at www.ioof.com.au)																							
(c) Is the company regula	Yes No (If 'yes', complete the Overseas Investor Form at www.ioof.com.au)																							
Yes	If ye	s, ple	ease	spec	ify re	gulate	or:				1	1					1							
Regulator (such as ASIC, APRA)																								
Licence number																								
No	If no	), go	to su	ub-se	ection	n (d)																		
(d) Is the company listed	wit	h th	ne A	\SX	?																			
Yes																								
No																								
(e) Is the company a maj	ority	y ov	vne	ed s	ubsi	idiar	y of	a liste	d c	om	par	ıy?												
Yes	If ye	s, ple	ease	prov	vide n	ame (	of the	listed c	omp	any:														
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(f) Company type																								
Public																								
Private/Proprietary	lfap	oropr	rieta	ry co	mpa	ny, co	mple	te sub-s	ectio	on (g	) bel	low.												

(g) Beneficial ownership – please list full names and addresses of shareholders /beneficial owners who own more than 25 per cent of the company.

To be completed for proprietary companies or if the company is **not** regulated, listed with the ASX, or, a majority owned subsidiary of a listed company.

Proceed to sub-section (h) if no individuals are identified in this section.

ven name(s) sidential address ote: PO Box not accepted) burb buntry  litically exposed persons are individuals who occupy a prominent public position or function in a government body or international ganisation, either within or outside Australia. This definition also extends to their immediate family members and close associates.																											
Shareholder/beneficial	OW	mei	ı																								_
Title (Dr/Mr/Mrs/Ms/Miss)							Su	rnar	me												L			$\sqsubseteq$	_		
Given name(s)																					<u></u>						
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	ther within or outside Australia. This definition also extends to their immediate family members and close associates.  cally exposed person?  Yes  No (If 'yes', complete the Politically Exposed Persons Form at www.ioof.com.au)  g overseas?  Yes  No (If 'yes', complete the Overseas Investor Form at www.ioof.com.au)														l												
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Shareholder/beneficial	ou a politically exposed person?  Yes No (If 'yes', complete the Politically Exposed Persons Form at www.ioof.com.au)  Person of the Politically Exposed Persons Form at www.ioof.com.au)  Person of the Politically Exposed Persons Form at www.ioof.com.au)  Person of the Politically Exposed Persons Form at www.ioof.com.au)																										
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Shareholder/beneficial	ow	ne	r 4																								
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Are you residing overseas?					Yes		N	o (If	'yes	', co	mple	ete t	he C	)vers	eas	Inve:	stor	Forn	n at	WW۱	v.ioc	of.co	m.a	u)			
(h) Other beneficial ov	vne	ers																									
To be completed if there are	no ir	ndiv	idual	s wh	no m	eet	the	requ	irem	nent	of s	ub-s	ecti	on (g	g)												
Please provide full details of i	ndiv	idua	als wh	ho d	irect	ly o	r ind	lirect	ly co	ontr	ol th	e cc	mpa	any.													
identified then the most seni the company's behalf).	are no individuals who meet the requirement of sub-section (g) of individuals who directly or indirectly control the company. ontrol through the capacity to determine decisions about financial or operating policies, or by means of trusts, its, understanding and practices, voting rights of 25 per cent or more, or power of veto. If no such person can be senior managing official/s of the company (such as the managing director or directors who are authorised to sign															n on											
Other beneficial owner	1																										
Title (Dr/Mr/Mrs/Ms/Miss)							Su	irnan	ne																		
Given name(s)																											
Residential address (Note: PO Box not accepted)																											
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Politically exposed persons a organisation, either within o																		_				-				l	
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Identification and tax real If you are applying as a color a separate form for individing financial adviser. To obtain 217 (or +613 8614 4966 if or	mpa duals n a co	iny, a who	nd h are of the	nave ben e rele	a fin efici evan	anci al ov t for	vner m(s)	s (as or if	app you	olicab ır det	ole), c tails c	or, ar char	n Adı ıge a	ditic at an	nal <sup>-</sup> ıy tin	Tax lı ne pl	nfor	mati	on F	orm	if yo	u do	not	hav	e a		
(i) Contact Person																											
A Contact Person must be n	omin	ated	d for	the	acco	unt.																					
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnan	ne																		
Given name(s) Mailing address (if different from above)																											
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<ul> <li>All future notices and cor</li> <li>The Contact Person mus</li> <li>If the Contact Person is in Facility must be completed</li> </ul>	t be d	one d	of th	e siç ıve a	gnato utho	ories ority	on t	the a ransa	icco ict c	ount on th	ie acc	coul	nt, o													tive	
<b>Security Password</b>																											
For security purposes and ea	asier	acce:	ss to	you	ır acı	cour	nt inf	form	atio	n via	the	tele	pho	ne,	plea	se p	rovi	de a	pass	swor	d:						
Security password																											
Please note: When a repres	entat	tive i	s no	min	ated	, no	acco	ount	info	ırma <sup>-</sup>	tion	will	be p	rovi	ided	via	the t	elep	ohor	ne ur	nless	this	pass	iowa	rd is (	quot	ed.
Part B investor details ( Please ensure all the re under this section befo	levar	nt ad	lditi	ona									tion	al Ta	ax In	ıforr	mati	on f	form	ıs ha	ve b	een	con	nple	ted		

# Part C – Trusts (Trust with a Corporate Trustee or Individual Trustees)

a)	Ful	l na	me	of	the	Tru	ıst																									
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(b	) Fu	ıll b	usir	es	s na	me	e (if	an	y) c	f th	e t	rus	tee	in ı	resp	oec	t of	th	e Tr	ust												
(c)	) Co	unt	ry c	of e	stal	blis	hm	en	t of	Tru	ıst																					
(d)	OI	anag Re	ged I	<b>nve</b> ered	stmo (pro	ent :	Sche AR	e <b>me</b> SN if	reg	istere	ed)	nora	nnu	ation	) Fu	nd)																
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	Ple	ease	spec	ify																								L				
	Ur	reg	ulat	ed T	rust	For	unr	egu	ated	d Tru	sts p	leas	e list	t the	per	son	(s) wl	no s	ettle	s the	e ini	tial s	um	or as	sets	to c	reate	e the	: Tru	st.		
	Fu	ıll na	me c	of se	ttlor	(s)																										
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i – Corporate Trustee	)/CC	)III.c	iCl	rei	SOI	I (CO	mpi	ete e	eitne	2r I – C	_orp	ora	te iri	uste	e <b>U</b>	К∥	– ir	aiv	iau	ai i	rust	ee(s)	on	ily)					
Company name																													
Contact Person⁵																													
							С.																						Т
Title (Dr/Mr/Mrs/Ms/Miss)							SL	ırnar	ne							T								$^{+}$					T
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Date of birth	D	D	/	Μ	M	/	Υ	Υ	Υ	Υ								Ge	end	er		М	ale			F	Fem	ale	
ii – Individual Trustee(	s)																												
Please list all trustee(s), inclu	ding	nam	ne(s)	and	add	ress(	(es):																						
Trustee 1 <sup>5</sup>					7																								
Title (Dr/Mr/Mrs/Ms/Miss)						ı	Su	ırnar	ne							L													<u> </u>
Given name(s)																													
This section must be comple	eted.	Not	e: PC	Воз	x car	n on	ly be	pro	vide	ed un	der '	'Mai	ling	add	ress	·.													
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Are you residing overseas?	a pci	5011;			Yes				-	s, com s', com					-												J111.	aa,	

<sup>5</sup> All future notices and correspondence will be sent to the **identified trustee** (trustee 1 for individual trustees) or the **contact person** (corporate trustee). The identified trustee or the contact person is intended to have authority to transact on the account on behalf of all trustees/signatories, Step 7 'Representative Facility', must be completed. Conditions applying to the appointment of a representative as detailed in the PDS (and any SPDS).

Trustee 2				1	1																						
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	ne																		
Given name(s) Residential address (Note: PO Box not accepted)																											
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(f) Beneficiary details	<b>–</b> to	be o	com	plete	ed or	nly if	'Ot	her	Trus	t ty	pe′ v	vas s	selec	ted	in sı	ubse	ctio	n (d)	on	page	14.						
Do the terms of the Trust ide	ntify	the	ben	efici	aries	by	refer	ence	e to	men	nber	ship	of a	clas	ss?												
Yes		-	es, plo iame									ciary	mei	mbe	rshi	p cla	ss/e	s (su	ch a	s un	it ho	lder	s, far	mily	mer	nbe	rs
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(g) Beneficial owners – t																							
Please confirm the Trustees I				. ,					. ,														
This includes control by actir control through the capacity															andi	ngs	and <sub>I</sub>	prac	tice	s; or	exer	cisin	ng
Trustee 1 Yes		No																					
Trustee 2 Yes		No																					
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Trustee 4 Yes		No																					
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**IOOF Portfolio Online registration:** To register for IOOF Portfolio Online, please complete the online Application form via the Portfolio Online area of the IOOF website (www.ioof.com.au). You can only register for this service after you have received an investor number.

## Step 3: Initial investment details

You can use this form to invest in one or more Trusts in the IOOF MultiMix range. The minimum investment amount is \$25,000 for each Trust.

Name of Trust	Amount to be invested		uld you like e distributed?^
		OPTION A Reinvested as additional units (✔)	OPTION B*  Deposited  directly into  your nominated  financial  institution  account  (✓)
IOOF MultiMix Capital Stable Trust	\$ .		
IOOF MultiMix Conservative Trust	\$ .		
IOOF MultiMix Moderate Trust	\$ .		
IOOF MultiMix Balanced Growth Trust	\$ .		
IOOF MultiMix Growth Trust	\$ .		
IOOF MultiMix Cash Enhanced Trust	\$ .		
IOOF MultiMix Diversified Fixed Interest Trust	\$ .		
IOOF MultiMix Australian Shares Trust	\$ .		
IOOF MultiMix International Shares Trust	\$ .		
Total	\$ .		

#### Important note:

For any initial deposit equal to or more than \$2 million you must also complete the High Threshold Transaction form available at www.ioof.com.au

#### ^ Please note:

- If you do not select a distribution method this will be taken as a direction to reinvest your income distribution as additional units in the Trust from which the income was derived.
- If you select Option B and a payment is rejected by your financial institution, this will be taken as a direction to reinvest that income distribution and all future income distributions as additional units in the Trust from which the income was derived.

#### # Income distribution account details

Only complete the section below if you have selected to have your distribution paid directly into your nominated financial institution account, and you have not previously provided us with your financial institution account details, or if you wish to change your nominated financial institution account.

Financial institution																
Branch																
Account name		1_		1												
BSB					Α	ccol	ınt r	num	ber							

#### Alternative ways of adding to your investment – BPAY facility (optional)

Additional investments can be easily made to your existing investment via BPAY. Further information on utilising the BPAY facility is included on page 3 of this forms booklet.

If you would like to set up your account for future BPAY investments directly through your nominated financial institution account, please tick the box below:

I/We would like to receive a Customer Reference Number (CRN) for making additional investments using BPAY.

The BPAY biller code for each Trust is listed in this forms booklet on page 3.

## Step 4: Tax file number (TFN) or Australian business number (ABN) notification or exemption

Important information regarding your TFN or ABN:

- Collection of your TFN or ABN information is authorised by law, and their use and disclosure are regulated by tax laws and the IOOF Group Privacy Policy.
- Quotation of your TFN or ABN is not compulsory<sup>7</sup> and it is not an offence if you decide not to provide us with this information.
- If you do not provide us with your TFN or ABN, tax will be deducted from your investment earnings at the highest marginal tax rate plus Medicare Levy and forwarded to the Australian Taxation Office (ATO).
- If you are exempt from quoting your TFN or ABN, you must indicate this below or tax will be deducted from your investment earnings.
- An investor who is not an Australian resident for tax purposes is not required to provide a TFN or ABN.

For more information about the use of TFN or ABN, please contact the ATO.

An ABN may be used as an alternative to a TFN if your investment is undertaken in the course of a business or an enterprise. If you are investing on behalf of a superannuation fund, please use the TFN of the superannuation fund.

I/We authorise the use of this TFN or ABN in respect of the investment for which I/we are applying.

Investor 1																			
TFN <b>OR</b> ABN																			
ITIN <b>OR</b> ADIN										 	1	 		-	 				
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Reason for exemption																			

<sup>7</sup> Note, under AML/CTF legislation, disclosure of an ABN is required for those individual investors investing as sole traders. If applicable, please provide this information under Step 2 – PART A, 'For Sole Traders Only'.

## Step 5: Proof of identity requirements

In accordance with the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act), your application cannot be processed unless this section is completed and you may be requested to provide additional information and documentation to facilitate IISL's compliance with AML/CTF legislation). AML/CTF legislation obligates IISL to verify the identity of each of its investors before providing financial services to them.

Please note, generally existing investors within the IOOF group, do not need to provide the proof of identity listed below.

#### Individual investor applicants

If you are a new individual investor in MultiMix, making a new investment application, you will need to provide originals or original certified copies of one or more of the following documents. The proof of identity documents are required to be submitted with your application form.

Type of investor (please ✓ appropriate box)	Proof of identity – please provide the relevant document(s).
Individuals acting for themselves  Note, for joint investors, the necessary proof of identity is required for each investor.  OR  Individuals acting as a sole trader	<ul> <li>Either one of the following Acceptable Primary Photographic ID documents:</li> <li>Current driver's licence (issued under Australian State/Territory, or a foreign country equivalent, containing a photograph of the individual). Please copy front and back of licence.</li> <li>Australian passport (an Australian passport that has expired within the preceding 2 years is acceptable).</li> <li>Foreign passport or an international travel document issued by a foreign government, the United Nations (UN) or an agency of the UN, containing a photograph and signature of the person whose name the document is issued*.</li> <li>Card issued under Australian State or Territory law for the purposes of providing a person's age containing a photograph.</li> <li>A National Identity Card issued by a foreign government, the UN or an agency of the UN, containing a photograph and signature of the person whose name the card is issued*.</li> <li>OR (Acceptable Secondary ID documents):</li> <li>A notice issued to an individual (showing the current residential address such as a tax notice within last 12 months or a utilities bill within last 3 months) that contains their residential address and records the provision of financial benefits/services or the debt owed by the individual.</li> <li>AND one of the following documents:</li> <li>Birth certificate or birth extract issued under Australian State/Territory.</li> <li>Birth certificate issued by a foreign government, the UN or an agency of the UN.</li> <li>Citizenship certificate issued by the Commonwealth.</li> <li>Citizenship certificate issued by a foreign government.</li> <li>A concession (health or pension) card issued by the Department of Human Services or Centrelink.</li> </ul>
(b) Individuals who have been nominated as a Representative or Power of Attorney	Either one of the following documents:     For verification of the identity of a nominated representative or Power of Attorney, refer to the proof of identity requirements listed in Section (a) above.  Please note:  Where a Power of Attorney has been granted, a certified copy of the Power of Attorney must be provided.

<sup>\*</sup>Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

#### Who can certify your documents?

The 'Completing Proof of Identity' document provides a list of persons authorised to certify copies of original documents. To obtain a copy please contact one of Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand). Alternatively, you can download a copy from our website at www.ioof.com.au.

#### All non-individual investor applicants (eg companies, trusts, partnerships and other types of investors)

When completing the relevant FSC/FPA Identification form(s), the identification requirements are included in these forms (if you have a financial adviser). An Additional Tax Information Form must be completed if you do not have a financial adviser. As a guide you can refer to the proof of identity requirements included in the 'Completing Proof of Identity' document. To obtain a copy please contact one of Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand). Alternatively, you can download a copy from our website at www.ioof.com.au.

## Step 6: Financial adviser details (financial adviser to complete, if applicable)

We will only register a financial adviser who:

- holds a current Australian Financial Services (AFS) Licence
- is an authorised representative of a current AFS Licensee.

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Dealer group																											
License name																											
Financial adviser name																											
Financial adviser number														AFS r	lice: num	.											
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I have completed and signed the relevant FSC/FPA identification form(s), which is attached to this Application (and retained

I have sighted and retained a certified copy of the applicant's identification document(s) recorded in the following 'Record of proof

a certified copy of the applicant's identification document(s)),  $\boldsymbol{\mathsf{OR}}$ 

of identity' table (please complete the table and declaration below).

OR

Verified from Original Certified copy Original Certified copy Decument issuer    Source date	Record of proof of iden	tity	(ID)	٨		I	D d	ocu	mei	nt 1								ID	loc	ume	nt 2	2						
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Proof of identity is required for all nominated representatives.  Please ensure the required proof of identity documents are included with this application form, as detailed in Step 5.	Pate of birth	D	D	/	М	М	/	Υ	Υ	Υ	Υ								Gen	der		М	ale			Fem	ale	
Please ensure the required proof of identity documents are included with this application form, as detailed in Step 5.	elationship to investor																											
Please ensure the required proof of identity documents are included with this application form, as detailed in Step 5.																												_
Declaration of representative											lude	ed w	ith t	nis a	pplic	atio	n fo	rm, a	as de	etaile	ed in	Ste	o 5.					
Declaration of representative																												-
the representative, have read and agree to the conditions as detailed in the PDS (and any SPDS), under 'Representative Facility'.	·																											

#### Investor(s) authority to nominate a representative

I/We:

- have read the conditions applying to the appointment of a representative in the PDS (and any SPDS) and agree to those conditions
- release, discharge and agree to indemnify IISL and any other related body corporate within the IOOF group and any investment management company appointed to manage investment assets of the Trusts against any and all losses, liabilities, actions, proceedings, accounts, claims and demands, (whether authorised by me/us or not) arising from the appointment of or exercise of powers by the representative
- agree that a payment made to my/our representative in accordance with the requests or instructions of the representative shall be to the complete satisfaction of the obligation of IISL to the extent of the payment, notwithstanding any fact or circumstance, including that the payment was requested, made or received without my/our knowledge or authority
- agree that if the payment is made in accordance with the request or instructions of the representative, I/we shall have no claim in relation to the payment against IISL or any other related body corporate within the IOOF group nor any investment management company appointed to manage the investment assets of the Trusts or in which the Trusts invest
- understand and acknowledge that I/we are bound by the actions of my/our representative in relation to the operation of my/our investments in the Trusts and
- authorise IISL to continue to follow instructions regarding this authority, until further notice in writing to cancel this authority is received by IISL.

#### Corporate investors

This nomination must be signed either:

- under common seal
- by two directors or a director and company secretary or
- by the sole director (where applicable).

If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary.

3 3							 _	•							•	•			•
Signatory 1								٦	Date	D	D	/	М	M	/	Υ	Υ	Υ	Υ
				1			_		Jale								_		_
Title (such as Director/Sole Director/Company Secretary)	L		<u> </u>																
Full name																			
<b>Signatory 2</b> (for joint investors or additional trustees, if applicable)									) ate	D	D	/	M	M	/	Υ	Υ	Υ	Υ
Title (such as Director/Sole Director/Company Secretary)																			
Full name																			
<b>Signatory 3</b> (for additional Trustees if applicable)			 						Date	D	D	/	M	M	/	Υ	Υ	Υ	Υ
Title (if applicable)			<u></u>																
Full name	L																		
<b>Signatory 4</b> (for additional Trustees if applicable)								Γ	Date	D	D	/	М	M	/	Υ	Υ	Υ	Υ
пазсез п аррпеавіе)				T			_	Т										i	
Title (if applicable)			<u> </u>																
Full name	L																		
Common seal																			
(of company) if required																			

### **Step 8: Applicant declaration**

I/We wish to invest in the IOOF MultiMix Trusts as described in the PDS (and any SPDS). I/We have personally received the PDS (and any SPDS) or paper print out of the electronic version of the PDS (and any SPDS) accompanied by, or attached to, this application form before applying for an investment in the Trust(s).

#### I/We declare that:

- all details in this application form are true and correct
- I/we have received and accepted this offer in Australia or New Zealand
- I/we acknowledge that I/we will promptly advise my/our financial adviser and/or IISL<sup>1</sup> if any of my/our details change at any time
- I/we certify that I/we am/are the applicant(s) named in Step 2
  of this application form OR I/we am/are authorised to provide
  information and complete this application form on their behalf (ie
  by way of Power of Attorney)
- I/we am/are aware that information provided about me/us and my/our accounts will be provided to the relevant tax authority within Australia and internationally
- I/we agree to provide any information that may be required for the identification purposes of AML/CTF, FATCA and CRS laws (as applicable).

I/We confirm that I/we have read and understood:

- that an investment made in the IOOF MultiMix Trusts does not represent an investment in IISL, nor any related body corporate within the IOOF group, nor any investment Services company appointed to manage the investment assets of the Trusts
- that neither IISL nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts guarantees the performance of any Trust or the return or repayment of capital or income
- the PDS (and any SPDS) in full and on becoming a unitholder, I/
  we agree to be bound by the provisions of the PDS (and any SPDS)
  and the constitution of the relevant Trust in the IOOF MultiMix
  Trusts range
- that investments in the Trusts are subject to investment risks including possible delays in repayment and loss of income and principal invested.

Т	arget Market Confirmation (mandatory)
1/	We declare that:
	I/We have received personal financial advice in relation to the IOOF MultiMix Trusts
	I/We have reviewed and understand the Target Market Determination for the IOOF MultiMix Trust(s) I have selected and confirm that the Trust(s) meet(s) my objectives, financial situation and needs
ir ir h	lease note: if your investment objective(s), intended use, nvestment timeframe and/or investment risk profile are nconsistent with those of the IOOF MultiMix Trust(s) you ave selected, then we suggest you seek financial advice that takes into account your personal circumstances.

#### AML/CTF, FATCA and CRS

- I/We have provided the appropriate documents, as outlined in the 'Completing Proof of Identity' document on www.ioof.com.au, that may be required for the purposes of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF Act)\*
- I/We confirm that I/we have correctly indicated any applicable foreign or United States tax residency status, for Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) laws in Part A of this Application form and during the customer identification process.
- If I/we are an applicant under Part B or Part C of this application form I/we confirm that I/we have correctly declared our identification and tax residency information in the FSC/FPA Identification forms (if investing with the assistance of a financial adviser) or the Additional Tax Information Form (if investing without the assistance of a financial adviser).
- If I/we previously have opened an IOOF product and my/our adviser has not conducted the customer identification procedure under AML/CTF FATCA and CRS laws in conjunction with this application, I/we confirm that I/we are not a foreign resident or US citizen(s) or resident(s)) for tax purposes, or are not purchasing this product on behalf of another foreign resident, and/or US citizen or resident for tax purposes.
- Proof of identity requirements are generally not required for existing investors within the IOOF group as detailed in the PDS.

#### **Privacy**

Information (including my/our personal information) provided to IISL is used for the purpose of opening an investment account and for other related purposes. IISL may disclose my/our personal information to its related bodies corporate, a person with whom I/ we have a joint investment, my/our financial adviser, professional advisers, businesses that have referred me/us to IISL, banks and other financial institutions, or to provide me/us with information about other products or services that may be of interest to me/us.

IISL is required to collect my/our personal information under the *Corporations Act 2001*, the AML/CTF, FATCA and CRS laws. If I/we do not provide all of the requested information, IISL may not be able to action my/our request. To verify my/our identity for Know Your Customer (KYC) purposes, IISL may also solicit personal information about me/us from reliable identity verification service providers.

My/Our personal information will be handled in accordance with the IOOF Group Privacy Policy. The Privacy Policy contains information about how I/we may access or correct my/our personal information held by IISL and how I/we may complain about a breach of the Australian Privacy Principles. I/We may request a copy of the Privacy Policy by contacting IISL on 1800 002 217 (or +613 8614 4966 if calling from New Zealand) or at www.ioof.com.au/privacy.

#### Marketing material

If you **do not** agree to IISL or any related body corporate within the IOOF group using your personal information for the purposes of marketing the products and services of the IOOF group from time to time, then please tick this box:

#### **Financial report**

A financial report is available online at www.ioof.com.au by 30 September each year, detailing the financial position of the Trusts at the financial year ending 30 June. Alternatively, you may choose to receive a hard copy of the financial report by ticking this box:

#### **Power of Attorney**

If your application is signed under a Power of Attorney, please enclose a certified copy of the Power of Attorney and the proof of identity documents required in Step 5 ('Proof of identity requirements') with your application form. If signed under Power of Attorney, the attorney certifies that he/she has not received notice of revocation of that power.

#### **Corporate investors**

This application form must be signed either:

- under common seal
- by two directors or a director and company secretary or
- by the sole director (where applicable).

#### Important reminder - Identification and tax residency requirements

(Only if you are a Company, Trust, or Other type of investor eg Partnerships and Associations)

If you have a financial adviser and are investing as Company, Trust or Other Investor, you will need to complete and return with your application form, the additional FSC/FPA Identification Form relevant to your investor type.

If I do not have a financial adviser you will need to complete the relevant Additional Tax Information Form if you are investing as a Company, Trust or Other investor. Refer to the separate 'Completing Proof of Identity' document to help you understand what you will need to provide us relevant to your investor type.

All relevant forms can be downloaded from our web site at www.ioof.com.au, or alternatively you can request a copy from Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand). If nominating a representative, please note additional proof of identity is required to be provided with this application form. Please refer to Step 7 'Representative Facility'.

If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary. Date Signatory 1 Title (such as Director/Sole Director/Company Secretary) Full name Signatory 2 Title (such as Director/Sole Director/Company Secretary) Full name Signatory 3 (for additional Date Trustees if applicable) Title (if applicable) Full name Signatory 4 (for additional Trustees if applicable) Title (if applicable) Full name

Common seal

(of company) if required

## IOOF MULTIMIX TRUSTS



5 October 2021

## Additional investment instruction form

If you are investing in the Trusts via an Investor Directed Portfolio Service (IDPS) or master trust, you must complete the documents that the IDPS or master trust requires. **You do not need to fill out this form.** 

For assistance please call Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

Complete this form if you wish to make an additional investment into one or more of your existing investments in the IOOF MultiMix Trusts.

#### Important information

**Step 1: Investor details** 

- Please complete these instructions in BLACK INK using CAPITAL LETTERS (except for your email address) and ✓ boxes where provided.
- The minimum additional investment amount is \$5,000 for each Trust.
- If this instruction has previously been made through a nominated representative or under a Power of Attorney, please complete **PART A** or **PART B** (as applicable) as well as the 'Nominated representative or Power of Attorney' section below.

## Account number Part A - Individual Investor or Joint Investors **Investor 1** (all the notes and correspondence will be forwarded to the address of Investor 1) Title (Dr/Mr/Mrs/Ms/Miss) Surname Given name(s) Mailing address Suburb State Postcode Date of birth Investor 2 (if applicable) Title (Dr/Mr/Mrs/Ms/Miss) Surname Given name(s) Mailing address Suburb State Postcode Date of birth

Part B –Non-individ	lua	l ir	ıve	sto	rs (e	eg co	omp	anie	es, tr	usts,	, par	tnei	ship	s, as	soci	atior	ns, re	egist	erec	d co-	ope	rativ	es, ç	jove	rnm	ent	
entities)																											
Name of Entity/Company Name of Trust (if applicable)																											
Name of contact pers	on	or i	dei	ntifi	ed 1	trus	stee	<b>e</b> ^																			
Title (Dr/Mr/Mrs/Ms/Miss)							Su	rnar	ne																		
Given name(s)																											
Mailing address																					1				<u></u>		
Suburb			1								1					Sta	ate				Pc	stcc	de				
Date of birth	D	D	/	Μ	M	/	Υ	Υ	Υ	Υ																	
^ As previously nominated for th	ne IOC	OF M	ultiM	ix Trus	ts acc	coun	t prov	video	d.																		
Nominated represe	enta	ativ	e o	r pc	we	r of	att	torı	ney	<b>,</b> ^^																	
Title (Dr/Mr/Mrs/Ms/Miss)	) [							Sur	nam	ne L																	
Given name(s)																											
^^ As previously nominated in	n writ	ting a	and a	ccepte	ed by	IISL a	as aut	horit	ty to	act o	n the	100	F Mul	ltiMi	x Trus	ts acc	ount	prov	/ided	l.							

## Step 2: Additional investment instruction

Please specify the additional investment(s) you would like to make to your existing investment in the IOOF MultiMix Trust(s):

Name of Trust	Amount to be invested
IOOF MultiMix Capital Stable Trust	\$
IOOF MultiMix Conservative Trust	\$
IOOF MultiMix Moderate Trust	\$
IOOF MultiMix Balanced Growth Trust	\$
IOOF MultiMix Growth Trust	\$
IOOF MultiMix Cash Enhanced Trust	\$
IOOF MultiMix Diversified Fixed Interest Trust	\$
IOOF MultiMix Australian Shares Trust	\$
IOOF MultiMix International Shares Trust	\$
Total	\$ .

#### Please note:

For any additional investment equal to or more than \$2 million you must also complete the High Threshold Transaction form available at www.ioof.com.au

Please make your cheque(s) payable to 'IOOF Applications Trust Account – Applicant(s) Name' marked 'Not Negotiable'.

**Post to:** IOOF MultiMix Trusts, Reply Paid 264, Melbourne, VIC 8060 **Enquiries:** 1800 002 217 (or +613 8614 4966 if calling from New Zealand)

**Fax:** 1800 558 539

#### Alternative ways of adding to your investment – BPAY facility (optional)

Additional investments can be easily made to your existing investment via BPAY. Further information on utilising the BPAY facility is included on page 3 of this forms booklet.

If you would like to set up your account for future BPAY investments directly through your nominated financial institution account, please tick the box below:

I/We would like to receive a Customer Reference Number (CRN) for making additional investments using BPAY.

The BPAY biller codes for each IOOF MultiMix Trust are detailed below:

Name of Trust	BPAY Biller code
IOOF MultiMix Capital Stable Trust	72223
IOOF MultiMix Conservative Trust	72470
IOOF MultiMix Moderate Trust	72249
IOOF MultiMix Balanced Growth Trust	72231
IOOF MultiMix Growth Trust	72488
IOOF MultiMix Cash Enhanced Trust	73015
IOOF MultiMix Diversified Fixed Interest Trust	73254
IOOF MultiMix Australian Shares Trust	73007
IOOF MultiMix International Shares Trust	72496

### Step 3: Financial adviser details (if applicable)

#### Financial adviser details

Dealer group															
Licensee name															
Financial adviser name															
Financial adviser number								lice							
T manetal adviser framiber							 		DCI						
Destruction															
Dealer stamp								J							

For assistance, financial advisers can contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

## **Step 4: Investor declaration**

I/We wish to add to my existing investment in the Trust(s) as detailed in this additional investment instruction form.

I/We confirm that I/we have personally received the PDS (and any SPDS) or paper print out of the electronic version of the current PDS (and any SPDS) for the Trust(s) in which I/we are requesting to invest.

I/We confirm that I/we have read and understood:

- that an investment made in the Trusts does not represent an investment in IOOF Investment Services Ltd (IISL), ABN 80 007 350 405,
   AFS Licence No. 230703, nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts
- that neither IISL nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts, guarantees the performance of any Trust or the return or repayment of capital or income
- that I/we agree to be bound by the provisions of the PDS (and any SPDS) and the constitution of the relevant Trust in the IOOF range
- that investments in the Trusts are subject to investment risks including possible delays in repayment and loss of income and principal invested.

#### **Privacy**

I/We understand, that:

- IISL is required to collect my/our personal information under the Corporations Act 2001 and the Anti-Money Laundering and Counter-Terrorism Financing Act 2006
- information provided to IISL is used for the purpose of operating my/our investment account and for other related purposes as detailed in the PDS (and any SPDS) and the IOOF Group Privacy Policy available at www.ioof.com.au/privacy
- IISL may disclose my/our personal information to internal and external parties as described in the PDS (and any SPDS)
- if I/we do not provide all of the information requested in this application form, IISL may not be able to action my/our request
- the IOOF Group Privacy Policy contains information about how I/we may access or correct the personal information held by IISL and how I/we may complain about a breach of the Australian Privacy Principles.

#### Who needs to sign?

All original investors registered on the account must sign this section unless previous authority has been provided in writing and accepted by IISL, such that:

- a single joint investor can sign on behalf of a joint investor account
- a representative nominated to act and operate on the account can sign on your behalf\* or
- a Power of Attorney can sign on your behalf\*, in which case a certified copy of the Power of Attorney must have been previously provided to IISL and retained on file for us to process your additional investment.
- If signed by a nominated representative or Power of Attorney, please ensure that the 'Nominated Representative or Power of Attorney' section in Step 1 is completed.

#### **Corporate investors**

This additional investment instruction form must be signed either:

- by the representative previously nominated for your IOOF MultiMix Trusts account or
- under common seal
- by two directors or a director and company secretary or
- by the sole director (where applicable).

If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary.

Signatory 1		Date	D	D	/	М	М	/	Υ	Υ	Υ	Υ
Title (such as Director/Sole Director/Company Secretary)												
Full name												
<b>Signatory 2</b> (for joint investors or additional trustees, if applicable)		Date	D	D	/	М	М	/	Υ	Y	Υ	Υ
Title (such as Director/Sole Director/Company Secretary)												
Full name												
					l							
<b>Signatory 3</b> (for additional Trustees if applicable)		Date	D	D	/	М	Μ	/	Υ	Υ	Υ	Υ
Title (if applicable)												_
Full name												
<b>Signatory 4</b> (for additional Trustees if applicable)		Date	D	D	/	М	М	/	Υ	Υ	Υ	Υ
Title (if applicable)												
Full name												
Common seal (of company) if required												

## ioof MULTIMIX TRUSTS



5 October 2021

## Switching instruction form

If you are investing in the Trusts via an Investor Directed Portfolio Service (IDPS) or master trust, you must complete the documents that the IDPS or master trust requires. **You do not need to fill out this form.** 

For assistance please call Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

Complete this form if you wish to switch your investment from one Trust to another Trust, within the IOOF MultiMix Trusts range.

#### Important information

**Step 1: Investor details** 

- Please complete these instructions in BLACK INK using CAPITAL LETTERS (except for your email address) and 
   ✓ boxes where provided.
- The minimum switch amount is \$5,000 for each Trust. You must maintain a minimum balance of \$25,000 in each Trust.
- Switching operates as a withdrawal of units in one Trust and the investment of units in another Trust and therefore may have taxation implications. Please contact your financial or taxation adviser for more information.
- If this instruction has previously been made through a nominated representative or under a Power of Attorney please complete **PART A** or **PART B** (as applicable) as well as the 'Nominated Representative or Power of Attorney' section below.

Account number										]																
Part A – Individual	Inv	est	or	or	Joi	nt	Inv	est	tor	5																
Investor 1 (all notices and	d corr	respo	onde	ence	e will	be s	sent	to th	ne a	ddres	ss of	nve:	sto	r	r 1)	r 1)	r 1)	r 1)	r 1)	r 1)	r 1)	r 1)	r 1)	r 1)	r 1)	r 1)
					]																					
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnaı	me			_														
Given name(s)																										
Mailing address																										
Suburb																	Stat	State	State	State	State Po	State Postco	State Postcode	State Postcode	State Postcode	State Postcode
Date of birth	D	D	/	М	М	/	Υ	Υ	Υ	Υ							Stat	Juic _	State	State	state	State	State	state	State	State
Date of Difti			_			J																				
Investor 2 (if applicable)																										
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnaı	me																	
Given name(s)											_					I										
Mailing address																										
Suburb																	Stat	State	State	State	State Po	State Postco	State Postcode	State Postcode	State Postcode	State Postcode
Date of birth	D	D	/	Μ	М	/	Υ	Υ	Υ	Υ																

Part B – Non-individual club/body, registered co-ope						_		pani	ies, t	rusts	s, pa	rtne	ership	os, a	ISSO(	ciatic	ns (	such	ı as i	ncoi	pora	ated	/uni	ncor	pora	ited	
Name of Entity/Company																											
Name of Trust																											
Name of contact pers	on	or i	nd	enti	ified	d tr	ust	ee/	\																		
itle (Dr/Mr/Mrs/Ms/Miss)  Surname  iven name(s)																											
Given name(s)																											
Mailing address																											
Suburb	burb State Postcode																										
Date of birth	D	D	/	Μ	М	/	Υ	Υ	Υ	Υ																	
^ As previously nominated for th	ne IOC	OF Mu	ultiM	ix Tru	sts ac	cour	it pro	vide	d.																		
Nominated represe	enta	ativ	e o	r po	owe	r o	f at	tor	ney	<b>/</b> ^^																	
Title (Dr/Mr/Mrs/Ms/Miss)	)							Sui	nan	ne [																	
Given name(s)																											
^^ As previously nominated i	n writ	ing a	nd a	ccept	ed by	' IISL	as au	thori	ty to	act or	n the	100	F Mul	tiMi	k Trus	sts acc	oun	t pro	/idec	l.							

## **Step 2: Switching instruction**

Please indicate which IOOF MultiMix Trust(s) you wish to be switched out of and into which Trust(s) you wish to invest.

Name of Trust	Switch from my existing Trust(s)	Switch to the following Trust(s)		uld you like e distributed?*
	(\$ or %)	(\$ or %)	OPTION A Reinvested as additional units (✓)	OPTION B#  Deposited  directly into  your nominated  financial  institution  account  (✓)
IOOF MultiMix Capital Stable Trust				
IOOF MultiMix Conservative Trust				
IOOF MultiMix Moderate Trust				
IOOF MultiMix Balanced Growth Trust				
IOOF MultiMix Growth Trust				
IOOF MultiMix Cash Enhanced Trust				
IOOF MultiMix Diversified Fixed Interest Trust				
IOOF MultiMix Australian Shares Trust				
IOOF MultiMix International Shares Trust				
Total				

#### \*Please note:

Dealer stamp

- Only complete if you wish to switch to a new Trust (in which you currently do not hold units) OR if you wish to change your current distribution instructions relating to your existing Trust(s).
- If you have selected to switch to a new Trust (in which you currently do not hold units) and do not select a distribution method, this will be taken as a direction to reinvest your income distribution as additional units in the Trust from which the income was derived.
- If you select Option B and a payment is rejected by your financial institution, this will be taken as a direction to reinvest that income distribution and all future income distributions as additional units in the Trust from which the income was derived.

#### # Income distribution account details

Only complete the section below if you have selected to have your distribution paid directly into your nominated financial institution account, and you have not previously provided us with your financial institution account details, or if you wish to change your nominated financial institution account.

Financial institution																		
Branch																		
Account name																		
BSB						Acco	unt nı	umb	er									
Step 3: Financial	advi	iser c	leta	ails (i	if app	licabl	e)											
													1					
Dealer group																		
Dealer group								Ť			Ť		Ť			T	i	
Licensee name																		
Financial adviser name																		
										licer								
Financial adviser number										num	ber L							

For assistance, financial advisers can contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

### **Step 4: Investor declaration**

I/We wish to switch investments in the Trusts as described in this switching instruction form. I/We confirm that I/we have personally received the IOOF MultiMix Trusts PDS (and any SPDS) or paper print out of the electronic version of the current PDS (and any SPDS) before applying for a switch/investment in the Trusts.

I/We declare that:

- all details in this switching instruction form are true and correct and I/we undertake to inform IISL of any changes to the information supplied as and when they occur
- the investor details to be registered against any investments into a new Trust(s) (of which I/we did not previously hold units), will be set up identically to the investor details registered on my/our existing Trust(s) account from which the switch is being processed and
- I/we have previously provided my TFN or ABN (or exemption)
  in respect of existing investments in the Trusts, and agree to
  IISL utilising my existing TFN or ABN information (or exemption)
  for the purposes of switches/investments into any new Trust(s).

I/We confirm that I/we have read and understood:

- that an investment made in the Trusts does not represent an investment in IOOF Investment Services Ltd (IISL), ABN 80 007 350 405, AFS Licence No. 230703, nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts
- that neither IISL nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts, guarantees the performance of any Trust or the return or repayment of capital or income
- the PDS (and any SPDS) in full and on becoming a unitholder, I/we agree to be bound by the provisions of the PDS (and any SPDS) and the constitution of the relevant Trust in the IOOF MultiMix Trusts range
- that investments in the Trusts are subject to investment risks including possible delays in repayment and loss of income and principal invested.

Target Market Confirmation (mandatory)											
I/We declare that:											
I/We have received personal financial advice in relation to the IOOF MultiMix Trusts  OR											
I/We have reviewed and understand the Target Market Determination for the IOOF MultiMix Trust(s) I have selected and confirm that the Trust(s) meet(s) my objectives, financial situation and needs											
Please note: if your investment objective(s), intended use, investment timeframe and/or investment risk profile are inconsistent with those of the IOOF MultiMix Trust(s) you have selected, then we suggest you seek financial advice that takes into account your personal circumstances.											

#### **Privacy**

I/We understand, that:

- IISL is required to collect my/our personal information under the Corporations Act 2001 and the Anti-Money Laundering and Counter-Terrorism Financing Act 2006
- information provided to IISL is used for the purpose of operating my/our investment account and for other related purposes as detailed in the PDS (and any SPDS) and IOOF Group Privacy
- Policy available at www.ioof.com.au/privacy

  IISL may disclose my/our personal information to internal and
- external parties as described in the PDS (and any SPDS)
   if I/we do not provide all of the information requested in this application form, IISL may not be able to action my/our request
- the IOOF Group Privacy Policy contains information about how I/we may access or correct the personal information held by IISL and how I/we may complain about a breach of the Australian Privacy Principles.

#### **Financial report**

A financial report is available online at www.ioof.com.au by 30 September each year, detailing the financial position of the Trusts at the financial year ending 30 June. Alternatively, you may choose to receive a hard copy of the financial report by ticking this box:

#### Who needs to sign?

All original investors registered on the account must sign this section unless previous authority has been provided in writing and accepted

by IISL, such that:

- a single joint investor can sign on behalf of a joint investor
- a representative nominated to act and operate on the account can sign on your behalf\* or
- a Power of Attorney can sign on your behalf\*, in which case
  a certified copy of the Power of Attorney must have been
  previously provided to IISL and retained on file for us to process
  your switch.
- If signed by a nominated representative or Power of Attorney, please ensure that the 'Nominated Representative or Power of Attorney' section in Step 1 is completed.

#### Joint investors only

(Note this does not apply to non-individual investors eg companies, trusts, partnerships, associations (such as incorporated/unincorporated club/body, registered co-operatives, government entities)

If each investor is able to operate the account and bind the other joint investor(s) for future transactions (including additional investments, switches and withdrawals) please tick this box:

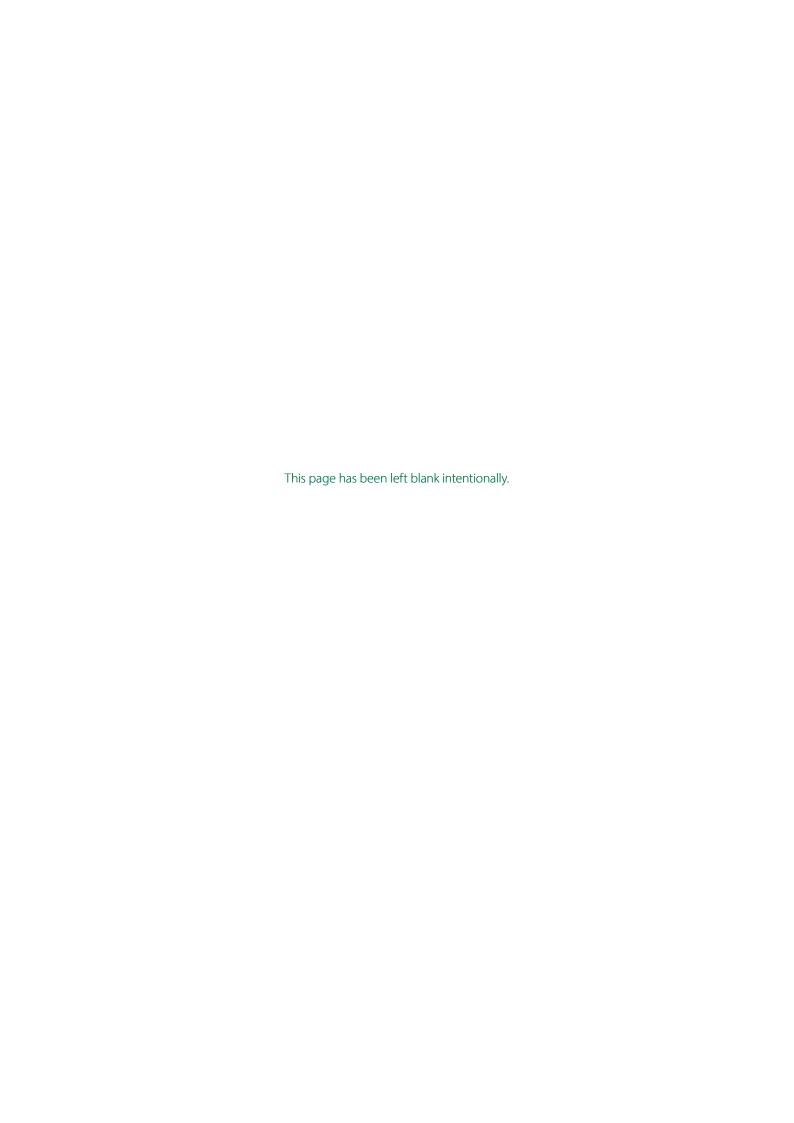
### **Corporate investors**

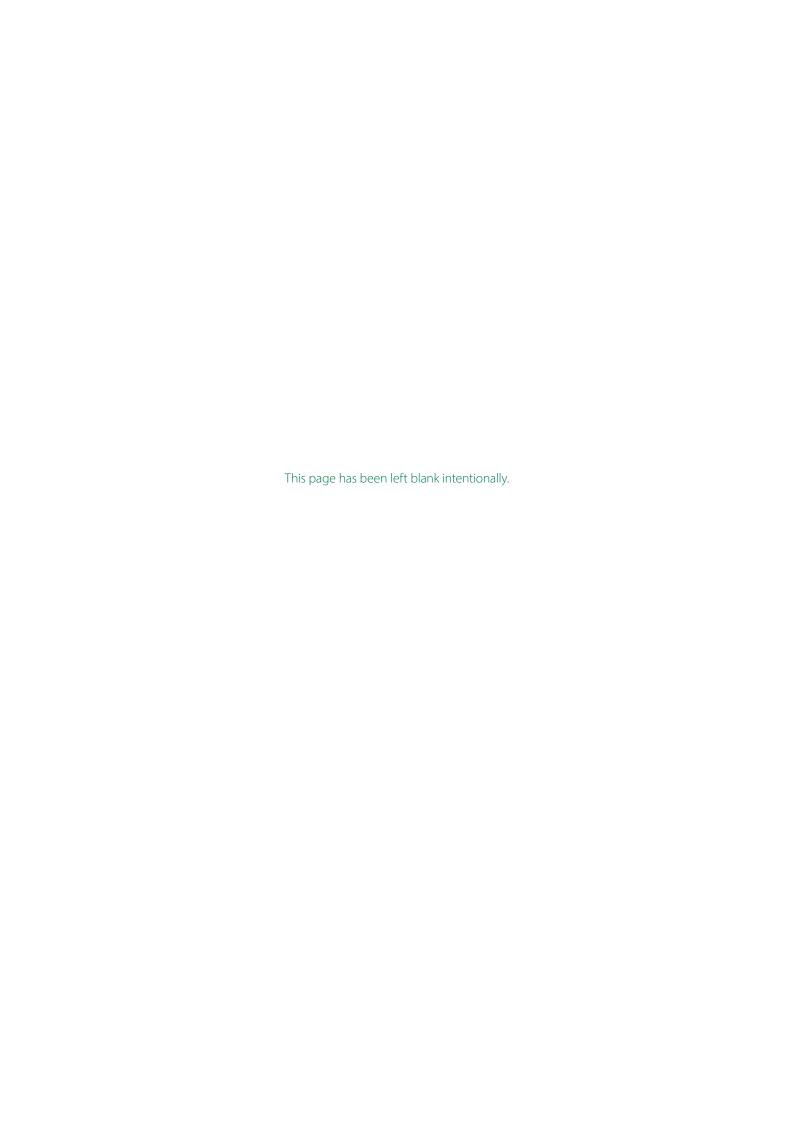
This switching instruction form must be signed either:

- by the representative previously nominated for your IOOF MultiMix Trusts account
- under common seal
- by two directors or a director and company secretary or
- by the sole director (where applicable).

If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary.

Signatory 1									Г	)ate	D	D	/	Μ	M	/	Υ	Υ	Υ	Υ
Title (such as Director/Sole Director/Company Secretary)																				
Full name																				
<b>Signatory 2</b> (for joint investors or additional trustees, if applicable)									D	ate	D	D	/	M	M	/	Υ	Υ	Υ	Υ
Title (such as Director/Sole Director/Company Secretary)																				
Full name								1												
<b>Signatory 3</b> (for additional Trustees if applicable)									С	ate	D	D	/	M	M	/	Υ	Υ	Υ	Υ
Title (if applicable)																				
Full name																				
<b>Signatory 4</b> (for additional Trustees if applicable)									D	ate	D	D	/	Μ	M		Υ	Υ	Υ	Υ
Title (if applicable)																				
Full name								1												
Common seal (of company) if required																				





## How to contact us

#### **Responsible Entity**

IOOF Investment Services Ltd ABN 80 007 350 405 AFS Licence No: 230703

#### **Registered Office**

161 Collins Street
Melbourne VIC 3000

#### **Postal address**

GPO Box 264 Melbourne VIC 3001

### Telephone

1**800 002 217** or +613 8614 4966 if calling from New Zealand)

#### Fax

1800 558 539

#### Email

investorservicesemails@ioof.com.au

#### Website

www.ioof.com.au