IOOF Investment Management Limited (IIML), ABN 53 006 695 021, AFS Licence No. 230524
Dated: 27 July 2011

IOOF Portfolio Service Investments
Regular Withdrawal Plan and Automatic Withdrawal Facility Form

Please complete this form if you are wishing to establish, change or cancel a Regular Withdrawal Plan and/or an Automatic Withdrawal Facility.
Please complete these instructions in BLACK/BLUE INK using CAPITAL letters and ✓ boxes where appropriate.

Step 1: Investor details

Account number ☐☐☐☐☐☐☐ – ☐☐ – ☐☐

Status of investor

☐ Individual investor (Complete Part A below)
☐ Joint investors
☐ Corporate investor (Complete Part B below)
☐ Trust
☐ Incorporated/Unincorporated club/body
☐ Self managed superannuation fund
☐ Deceased estate

Part A: INDIVIDUAL OR JOINT INVESTORS

Investor 1

Title (Dr/Mr/Mrs/Ms/Miss) ☐☐☐☐ Surname ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Given name(s) ☐☐☐

Investor 2 (for joint investors only, if applicable)

Title (Dr/Mr/Mrs/Ms/Miss) ☐☐☐☐ Surname ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Given name(s) ☐☐☐

Part B: CORPORATE INVESTOR (including CORPORATE TRUSTEE), TRUST (INDIVIDUAL TRUSTEE)(S)), INCORPORATED/UNINCORPORATED CLUB/BODY, SELF MANAGED SUPERANNUATION FUND, DECEASED ESTATE

Name of entity/company/ corporate trustee ☐☐☐

Name of trust ☐☐☐

Name of contact person ☐☐☐

Step 2: Regular Withdrawal Plan

Do you wish to:

☐ Establish a Regular Withdrawal Plan – Please fill in the details below.

OR

☐ Change a Regular Withdrawal Plan – Please fill in the details below.

OR

☐ Cancel a Regular Withdrawal Plan – Please complete the date field below.

Effective date: ☐☐ / ☐☐☐☐

Regular withdrawal amount required: $ ☐☐☐☐☐☐☐☐☐☐ (minimum $200)

Desired debit frequency: ☐ Monthly ☐ Quarterly

Please note:

- Complete step 4 if you are establishing a Regular Withdrawal Plan or wishing to change the details of your nominated financial institution account into which the regular withdrawal payments are to be credited.
- Regular withdrawals may be delayed if there is insufficient cash in your Cash Account to meet the regular withdrawal amount.
- Regular withdrawals are paid out of your Cash Account on the 1st day of the month or the nearest business day after.

Step 3: Automatic Withdrawal Facility – for automatic payment of accumulated income distributions

Do you wish to:

☐ Establish an Automatic Withdrawal Facility

OR

☐ Cancel an Automatic Withdrawal Facility

Desired frequency: ☐ Monthly ☐ Quarterly

Please note:

- Complete step 4 if you are establishing an Automatic Withdrawal Facility or wishing to change the details of your nominated financial institution account into which the income distributions are to be credited.
- Accumulated income distributions from the Cash Account are withdrawn either monthly or quarterly and paid into your nominated account with your financial institution.
- Amounts less than $200 will be held in your Cash Account until the next payment period.
- The Automatic Withdrawal Facility is run on the 15th day (or the next business day) of the month following the end of the relevant month or quarter.

Step 4: Financial institution details for Regular Withdrawal Plan and Automatic Withdrawal Facility

Please provide the details of your nominated account with your financial institution to have your regular withdrawals and/or income distribution paid to you.

Financial institution

Name of financial institution

Name of branch

Address of branch

Suburb State Postcode

Account name

BSB – Account number

Important note:

The account name with the above financial institution must be the same as the name of the investment account.

Step 5: Declaration

I/We request the Service Operator, IOOF Investment Management Limited (IIML), ABN 53 006 695 021, AFS Licence No. 230524, to make the changes in this form to my/our account.

I/We confirm that I/we received, read and understood the current IOOF Portfolio Service Investments Offer Document dated 1 June 2011 and are bound by its terms and conditions.

I/We understand that any directions which I/we have given here will override any similar directions I/we have previously given.

I/We declare that all details in this form are true and correct.

I/We acknowledge that I/we have read and understood the privacy information contained in the Offer Document and consent to the collection, use, storage and disclosure of my/our personal information as described in the Offer Document. I/We also acknowledge that a copy of the IOOF group Privacy Policy is available on the website (www.ioof.com.au) or can be obtained from our client services team on 1800 062 963.

Joint investors

If there are joint investors, both investors are required to sign below unless instructions to accept one signature have previously been given to us in writing.

Note for Power of Attorney

If this form is signed under a Power of Attorney, please enclose a certified copy of the Power of Attorney with this form. If signed under Power of Attorney, the attorney certifies that he/she has not received notice of revocation of that power.

Note for corporate account holder

This application must be signed either:

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

Step 5: Declaration (continued)

Part A: INDIVIDUAL OR JOINT INVESTORS

Signatory 1

X

Full name

Date D D / M M / Y Y Y Y

Signatory 2 (if applicable)

X

Full name

Date D D / M M / Y Y Y Y

Part B: CORPORATE INVESTOR, TRUST, SELF MANAGED SUPERANNUATION FUND, INCORPORATED/UNINCORPORATED CLUB/BODY OR DECEASED ESTATE

Signatory 1

X

Title (Director/Sole Director/Company Secretary)

Full name

Date D D / M M / Y Y Y Y

Signatory 2

X

Title (Director/Sole Director/Company Secretary)

Full name

Date D D / M M / Y Y Y Y

Signatory 3 (for additional Trustees if applicable)

X

Title (if applicable)

Full name

Date D D / M M / Y Y Y Y

Signatory 4 (for additional Trustees if applicable)

X

Title (if applicable)

Full name

Date D D / M M / Y Y Y Y

Common seal (of company) if required

Post to: IOOF Portfolio Service, Reply Paid 264, Melbourne VIC 8060
Enquiries: 1800 062 963
Fax: 1800 558 539
Service Operator: IOOF Investment Management Limited (IIML), ABN 53 006 695 021, AFS Licence No. 230524