

STANDARD TRANSFER FORM

TRANSFER DETAILS			
NAME OF FUND		REGISTER	VICTORIA
DESCRIPTION OF UNITS	FULLY PAID		
NUMBER OF UNITS		CONSIDERATION \$	
TRANSFEROR(S) / SELLER(S) DETAILS			
INVESTOR ACCOUNT NUMBER		ADVISER	
INVESTOR 1 / TRUSTEE			
INVESTOR 2 / COMPANY			
INVESTOR 3 / SUPER FUND			
TRANSFeree(S) / BUYER(S) DETAILS PLEASE COMPLETE THE AML CHECKLIST			
INVESTOR ACCOUNT NUMBER (IF EXISTING)		ADVISER	
INVESTOR 1 / TRUSTEE / JOINT / SOLE TRADER		DATE OF BIRTH	
INVESTOR 2 / TRUSTEE / JOINT / COMPANY / CORPORATE TRUSTEE		DATE OF BIRTH	
INVESTOR 3 / PARTNERSHIP		DATE OF BIRTH	
TRUST / SUPERFUND			
RESIDENTIAL ADDRESS OF TRANSFEREE(S)	STREET		
	SUBURB	STATE/COUNTRY	POSTCODE
	EMAIL		
	PHONE	TFN/ACN/ABN OR EXEMPTION	
DISTRIBUTION PAYMENT METHOD			
<p>Some Eclipse funds offer the option to receive distribution payments in the form of additional units (known as 'distribution re-investment'), instead of a cash payment. Units will be issued at the Unit Price determined on the day that the distributions are paid by the Fund.</p> <p> <input type="checkbox"/> please reinvest my distributions until further notice <input type="checkbox"/> please pay my distributions to the bank account detailed below </p>			
DISTRIBUTION BANK ACCOUNT DETAILS	ACCOUNT NAME		
	BANK	BSB	ACCOUNT NUMBER
SIGNING			
<p>I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above name(s) hereinafter called the Buyer(s) the units specified above standing in my/our name(s) in the books of the above-named entity, subject to the several conditions on which I/We held the same at the time of signing hereof and I/We the Buyer(s) do hereby agree to accept the said units subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed.</p>			
SIGNING - TRANSFEROR / SELLER			
TICK BOX (if appropriate)	SOLE DIRECTOR	/ DIRECTOR	/ TRUSTEE
INVESTOR 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INVESTOR 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INVESTOR 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DATE SIGNED			
SIGNING - TRANSFeree / BUYER			
TICK BOX (if appropriate)	SOLE DIRECTOR	/ DIRECTOR	/ TRUSTEE
INVESTOR 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INVESTOR 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INVESTOR 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DATE SIGNED			