Baillie Asset Management

Withdrawal Form

type of investor ☐ individual ☐ joint ☐ company ☐ trust ☐ super fund ☐ partnership

investor number

investment fund

investor details

name of investor 1

name of investor 2

name of investor 3

full withdrawal

☐ yes

or

☐ no, please enter the amount ($)

payment details

please check your bank account details carefully. It is your responsibility to ensure all payee details are correct. Payments are processed using the BSB and account number provided, and account names are used as a reference only. Incorrect details may result in a loss of funds and we do not guarantee their recovery. We do not accept liability for funds unable to be recovered. Please confirm the correct details with the payee.

☐ to nominated bank account on file

or

☐ to the bank, building society or credit union detailed below

bsb

account number

bank name

branch

name(s) in which account is held

or

☐ by cheque

correspondence

please initial any changes you have made which have been crossed out

please attention: PO Box 49, COLLINS STREET WEST VIC 8007

signing

I / we authorise you to act in accordance with my / our instructions set out above. I/ we acknowledge that these instructions supersede and have priority over all previous instructions in respect to my / our units

signature investor 1

signature investor 2

signature investor 3

signature or company seal (if required)

director

director/secretary

date d d / m m / y y y y