

Wholesale Mezzanine Investments Withdrawal Form

Important information about withdrawing from your investment

How do I make a withdrawal from my investment?

You can withdraw at any time, provided your balance does not fall below \$10,000 per fund. We normally pay the proceeds of withdrawals within seven working days of receiving your request. Longer periods may apply from time to time. In extraordinary circumstances, we may suspend withdrawals.

By providing either a previously nominated Australian financial institution account instruction or an original signed request at the time of withdrawal, we can credit your nominated account with cleared funds which are generally available to you sooner than by sending you a cheque.

If we receive your fully completed withdrawal request (including all information required to establish your identity) in a Colonial First State office by 3pm on a NSW business day, we will process your withdrawal using the exit unit price calculated, based on market valuations, at the close of business that day. Where an option is suspended, restricted or unavailable, we may not process withdrawal requests. Any decisions whether to process withdrawals or partial withdrawals will be made in the best interests of investors as a whole, and if any payment is to be made, then the exit price used to calculate this payment will be the one determined at the time the payment is made.

Withdrawing may have taxation implications. Please consult your tax or financial adviser.

Anti-Money Laundering and Counter-Terrorism Financing laws and Sanctions laws

We are required to comply with these laws, including the need to establish your identity (and, if relevant, the identity of other persons associated with your account) and accordingly hold such information. Instructions for completing the identification process are included with the application forms.

Additionally, from time to time, we may require additional information to assist with this process and keep a record. Where legally obliged to do so, we may disclose the information gathered about you to regulatory and/or law enforcement agencies, and we may not be able to tell you when this occurs.

We may be unable to transact with you or other persons. This may include actions such as delaying, blocking, freezing or refusing to process a transaction, or ceasing to provide you with a product or service, if we have reasonable grounds to believe or suspect potential breaches of Australian and/or international laws or sanctions. This may impact on your investment and could result in a loss of income and principal invested. We will not incur any liability for any loss suffered if we are required to take one or more of these actions.

Unit prices and transaction processing

Colonial First State calculates unit prices each NSW business day.

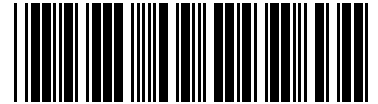
When you request to invest or withdraw your investment, your request must be received before the relevant cut-off time (outlined in the current Product Disclosure Statement (PDS) and the unit price to be used for your request will be the next available unit price. The next available unit price is calculated, based on the market value of the option (less liabilities), at the close of business on the day of your request. We determine the market value of an option based on the information we have most recently available.

If you ask for a unit price or investment valuation we can provide an historical unit price or investment value only.

Should you then decide to transact, as outlined above, you will receive the next available unit price or investment value. It is important to consider this when making your transaction requests. Please refer the current PDS for further details.

Please call Investor Services on 13 13 36 or email contactus@cfs.com.au with any questions.

Wholesale Mezzanine Investments Withdrawal Form



Please complete this form using **BLACK INK** and print well within the boxes in **CAPITAL LETTERS**. Mark appropriate answer boxes with a cross **X**. Start at the left of each answer space and leave a gap between words.

Please contact Investor Services on **13 13 36** if you have any questions.

SAVE FORM

PRINT FORM

1 INVESTOR DETAILS

Account number

INVESTOR 1 OR COMPANY/PARTNERSHIP

Mr Mrs Miss Ms Other

Given name(s)

Surname/Company/Partnership name

Date of birth

Your postal address

Unit number Street number PO Box
Street name
Suburb
State Postcode
Country

Have you discussed this transaction with your adviser?

Yes No

INVESTOR 2 (IF APPLICABLE)

Mr Mrs Miss Ms Other

Given name(s)

Surname/Company/Partnership name

Date of birth

Your postal address

Unit number Street number PO Box
Street name
Suburb
State Postcode
Country

2 PAYMENT INSTRUCTIONS

Only one method can be selected. Please cross (X) one:

Credit Credit my Australian financial institution account shown in **section 6**.

Cheque Mail a cheque to my address. Cheques issued **are not** bank cheques.

Cheque Mail a cheque to the address shown in **section 5**. Cheques issued **are not** bank cheques.

Note: If no payment method is selected, a cheque will be issued.

3 WITHDRAWAL INSTRUCTIONS

I would like to close my account **OR**

Leave minimum balance required. Minimum remaining account balance is \$10,000, per fund **OR**

I would like to make a withdrawal as shown below.

Fund name	Amount	OR	Units
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
TOTAL	\$ <input type="text"/>		<input type="text"/>

4 THIRD PARTY PAYMENT INSTRUCTIONS

Complete this section only if making a third party payment.

Issue a cheque in favour of:

and (cross (X) as applicable)

Post to the address shown in **section 5**

Hold the cheque at a Colonial First State office in: Sydney Melbourne Brisbane Perth Adelaide

where

I/We will collect the cheque personally

the cheque will be collected by (name of authorised person) whose signature appears below

Signature of authorised person (this must be supplied)

5 ADDRESS TO WHICH PAYMENT IS TO BE SENT (IF DIFFERENT TO THAT PREVIOUSLY ADVISED)

Postal address

Unit number Street number PO Box Street name

Suburb State Postcode

Country

6 DETAILS OF ACCOUNT TO BE CREDITED

Note: New bank account details via fax **cannot be** accepted.

Name of Australian financial institution

Branch name

Branch number (BSB)
 -

Account number

Name of account holder

7 DECLARATION AND SIGNATURE

I/We declare that:

- The Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) requires us to verify your identity before we can process your instructions. This means your personal information will be provided to an authorised third party to use the Australian Government Document Verification Service that matches government-issued identification documents (e.g., passport, driver's licence, birth certificate, Medicare, social security) with the issuing government agency. This information and the search results are retained by us to comply with our identification and record-keeping requirements. By signing this form, you give your consent for your identity information to be verified electronically through the Australian Government Document Verification Service. Your personal information will be handled in accordance with our privacy policy, which includes our Privacy Collection Notice. Please click 'Privacy' at the bottom of any webpage on the CFS public website. If you have any further questions, please contact us by calling our Service Centre on 13 13 36. You can find more information about the Document Verification Service at www.dvs.gov.au.
- I/we have read the current Product Disclosure Statement (PDS)
- if this form is signed under an authority provided under a legally binding authority, such as a Power of Attorney or a Guardianship, the authority holder declares that they have not received notice of revocation of that power (a certified copy of the document should be submitted with this form unless we have already sighted it).
- sole signatories signing on behalf of a company confirm that they are signing as sole director and sole secretary of the company
- all details in this form are true and correct
- I/we have read and understood the important information provided with this form.

I/we acknowledge and agree that CFSIL and/or its related entities will not be liable to you for any loss you suffer (including consequential loss) caused by the fact that we may delay, block, freeze or refuse to process a transaction or refuse to provide you any (initial or ongoing) services, in circumstances where:

- we have a legal obligation to refuse to provide those services;
- your transaction may cause us or you to breach any Australian laws or the laws of another country.

Note: Withdrawals cannot be processed until application cheques are cleared and all necessary documentation is completed. In the case of units held by companies, this form should be executed in accordance with the constitution of the company.

Colonial First State Wholesale Mezzanine Investments are offered by Colonial First State Investments Limited ABN 98 002 348 352 AFSL 232468 (CFSIL).

Signature of investor 1 or company officer

Print name

Date signed

Signature of investor 2 or company officer

Print name

Date signed

If you are signing under an authority provided under a legally binding authority, such as a Power of Attorney or a Guardianship, please comply with the following:

- Attach a certified copy of the document.
- Each page of the document must be certified by a Justice of the Peace, Notary Public or Solicitor.
- Should the document NOT contain a sample of the authority holder's signature, please also supply a certified copy of the identification documents for the authority holder, containing a sample of their signature, e.g. Driver's Licence, Passport, etc.
- The authority holder will also need to complete a 'Power of Attorney (POA) & Guardianship Order' form (to enable us to establish the identity of the authority holder) which can be obtained from our forms library at cfs.com.au or by phoning Investor Services on 13 13 36.

Mail the completed form to:

Colonial First State, Reply Paid 27, Sydney NSW 2001

or submit via the secure online system (e-Post) with FirstNet Investor.