

For Perpetual: WealthFocus Investment Advantage, WealthFocus Investment Funds, Perpetual Investment Funds, Wholesale International Share Fund, Pure Series Funds, Pure Credit Alpha Fund, Barrow Hanley Global Funds and Trillium Global Funds

Perpetual Investment Management Limited ABN 18 000 866 535 AFSL 234426

Change of instructions form

Please complete all pages of this form in black ink using BLOCK letters. Mark appropriate boxes with a cross like the following X. Start at the left of each answer space and leave a gap between words.

1. Investor details (must be completed)



* If you provide your email address we will update our records accordingly. If you are updating your mobile number, we will also require certified identification.

2. Change of investor details

A. Individual and joint account holders

Investor 1 (individual account holder)

title		title				
Mr Mrs Miss Ms	other	Mr Mrs	Miss	Ms	other	
first name(s)		first name(s)				
last name		last name				
occupation		occupation				
date of birth	gender	date of birth			gender	
	male female		МТАТ	YY	male	female
Residency status for tax purposes		Residency sta	atus for tax p	ourposes		
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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. For the United States, tax residency can also be as a result of citizenship or residency.

Please answer <u>BOTH</u> of the following tax residency questions:

1. Are you a tax resident of Australia?

yes		(complete the following details and then proceed to question 2 below) no								(proceed to question 2 below)
tax f	ïle r	numb	er (T	FN)						
									or	
TFN exemption code										

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. For the United States, tax residency can also be as a result of citizenship or residency.

Please answer <u>BOTH</u> of the following tax residency questions:

1. Are you a tax resident of Australia?

Investor 2 (joint account holder)

yes	(complete the following details and then proceed to question 2 below) no									(proceed to question 2 below)
tax file number (TFN)										
	or									
TFN e	TFN exemption code									

2. Change of investor details (continued)

A. Individual and joint account holders Investor 1 (individual account holder)

Investor 1	(individual account holder)	Investor 2 (joint account holder)									
2. Are you	a tax resident of anothe	er country?	2. Are you a tax resident of another country?									
yes	(complete the following details)	no	yes following details) no									
identifica A TIN refe of adminis Australia.	tion number (TIN) for eac	by a country for the purpose ne equivalent of a TFN in ease list one of the three	If 'yes', please list all relevant countries and provide your tax identification number (TIN) for each country.									
Country 1			Country 1									
TIN		If no TIN, list reason A, B or C	TIN		If no TIN, list reason A, B or C							
Country 2			Country 2									
TIN		If no TIN, list reason A, B or C	TIN		If no TIN, list reason A, B or C							
separate s Reason A	 e more than two countries, sheet and tick this box. a: The country of tax residents. b: I have not been issued v 	ency does not issue TINs to	separate s Reason A	e more than two countries sheet and tick this box. The country of tax resid tax residents. I have not been issued of	ency does not issue TINs to							
	C: The country of tax reside TIN to be disclosed. al address (mandatory) per street number	ency does not require the	Reason C: The country of tax residency does not require the TIN to be disclosed.Residential address (mandatory) unit numberstreet number									
street nan			street nar									
suburb (if	relevant) or city		suburb (if	relevant) or city								
state	postcode		state	postcode								
country			country									
phone (bu	isiness hours)		phone (business hours)									
phone (aft	er hours)		phone (after hours)									
mobile			mobile									
email add	ress		email add	ress								

By providing my/our email address, I/we agree to receive any information about my/our investment (such as transaction confirmations, statements (including tax statements), reports and other materials or notifications required by the Corporations Act) electronically. This may include email notifications advising me/us when new information regarding my/our investment is available for viewing online, via hyperlink or via Investor Centre. I/We acknowledge you may still need to send me/us information by mail from time to time. If you are updating your mobile phone number, we will also require certified identification.

Note: This consent does not relate to documents such as notices of meetings, voting or proxy forms or Fund annual reports.

2. Change of investor details (continued)

A. Individual and joint account holders - Postal address (optional)

Investor 1 (individual account holder) Investor 2 (joint account holder)

po box	unit number	street number	po box	unit number	street number
street name			street name		
suburb			suburb		
state	postcode		state	postcode	
country			country		
B. All other ac	count holdors				
company nam					
name of supe	rannuation fund trust	partnership, association,	government body	or co-operative	
	lannaaton lana, itaol,		government body		
c/-					
po box	unit numbe	er street number			
street name					
suburb					
state	postcode c	ountry			
phone (busine	ess hours)	mobile		fax	
email address					

Provide your email address and we will provide you with email notification of new account correspondence as it becomes available.

3. Change of authorised representative appointment

I/We have read and agree to the conditions applying to the appointment of an authorised representative as set out in the relevant Product Disclosure Statement.

You can self-service through Investor Centre to provide View only online access to that representative																	
authorised represe	entative details:																
first name(s)			4	ł	ŀ	Н	н	+	4	4	4		Ц		H	Н	Н
last name																	
po box	unit number	street number															
street name																	
				Г			Т					Г					
suburb																	
							Т										
state	postcode	country															
email address																	
signature of authorised representative								da	ate	D)	Μ	Μ	/	/ Y	Ý	Υ

4. Change of account details

You can only nominate a bank account that is held in your name(s). By providing your bank account details in this section, you accept the terms in the Direct Debit Service Agreement and authorise Perpetual to use these details for all future transaction requests that you nominate.

If you are updating or providing new bank details, you will need to provide a copy of your bank statement for verification purposes.

Bank account

Complete your bank ac	count details in this section	on and in	dicate w	vhat you	ı would	l like u	s to us	e thes	e ban	k acc	ount	deta	ils fo	or	
withdrawals	distribution payments	mor	nthly sav	ings pla	เท	mor	thly w	ithdrav	val pla	an					
name of financial institu	ution														
branch name															
branch number (BSB)	account number		_												
name of account holde	r														
signature of account he	older A			signat	ure of a	accoun	t holde	ər B							
date DD/MM	γγγγ														

Please note section 7 of this form must also be completed.

5. Change of distribution details

Reinvest distributions for all my funds in this account.

Pay all distributions to my bank account as specified in Section 4.

• If you wish to reinvest your distributions for specific investment funds within your account, please contact us on 1800 022 033.

6. Change of financial adviser

Complete this section if you are changing your financial adviser.

I/We have a new financial adviser whose details appear below. I/We acknowledge that Perpetual will hold personal information about me/us and will disclose this information to my/our financial adviser. I/We acknowledge that Perpetual will cease to disclose this personal information if I/we notify Perpetual that the financial adviser whose details appear below no longer acts on my/our behalf.



7. Investor signature(s)

- Please sign this form where indicated below. This form must be signed as per the current signing instructions we have on record. If no amendments have been made, the current signatories for the account are the individuals who signed the initial investment application form.
- If signed under power of attorney, the attorney certifies that he or she has not received notice of revocation of the power of attorney. Please include the power of attorney (or a certified copy) with this form if it has not previously been provided to Perpetual.
- For information, please call Investor Services on **1800 022 033** during business hours (Sydney time), visit **www.perpetual.com.au** or email **PerpetualUTqueries@cm.mpms.mufg.com**

Signature of investor 1 or company officer	Signature of investor 2 or company officer
print name	print name
capacity (company investments only)	capacity (company investments only)
sole director director secretary	director secretary
date	date

Please send the completed form to: **Perpetual Investments Unit Registry** Locked Bag 5038 **Parramatta NSW 2124** or email: **PerpetualUTinstructions@cm.mpms.mufg.com**