

JBWere Cash Trust Periodic payment form

JBWere

November 2015

Issued by: The Trustee, MLC Investments Limited ('MLC'), ABN 30 002 641 661, AFSL 230705. JBWere Cash Trust ARSN 160 854 277
Administered by: JBWere Limited ('JBWere'), ABN 68 137 978 360, AFSL 341162

Your details

1. Please provide your details

Account name

Investor number

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Periodic payment instructions

2. Please select one of the following options for your periodic payment

New Amendment Cancellation

In order for us to follow your instruction above please provide the following information:

Current payment amount \$ New payment amount \$

Commencement date (DD/MM/YYYY)

Termination date (DD/MM/YYYY) No end date at this time

How often would you like payments to be made?

Weekly Fortnightly Monthly Quarterly Annually

If you do not make a selection, it is assumed payments will be monthly.

If the date of your payment falls on a non-business day (including weekends and public holidays) would you like the payment made before or after the non-business day?

Before After

If you do not make a selection, it is assumed you would like the payment made beforehand.

Account nomination details

3. Please provide details of the account to be credited (must be an Australian bank or financial institution account)

Name of financial Institution

BSB

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Account name (e.g. Peter Alfred Brown, Brown Pty Ltd, Metro Soccer Club Inc.)

Account number

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Reference

Applicant signature(s) – ALL APPLICANTS MUST COMPLETE THIS SECTION

Instructions for signing the Periodic Payment Form:

- Companies must arrange for this form to be signed by:
 - o two directors;
 - o a director and a secretary;
 - o if a sole director, then sole director to sign; or
 - o duly authorised representatives of the company.
- Companies signing by duly authorised representatives must provide appropriate documentation showing the proper appointment of the representatives.
- Joint account holders must all sign this form.
- If signed under a Power of Attorney, the attorney must attach a current certified copy of the Power of Attorney if not already supplied. The Attorney hereby certifies that no notice of revocation of that power has been received by the attorney.
- Applications by Incorporated Associations/Clubs must be signed by the authorised office bearers, for example, A. Smith – President, and a copy of the Constitution/Rules must be attached.

1st Individual

Capacity

Individual
 Director
 Sole director and sole secretary
 Individual trustee
 Duly authorised representative (attach authority)
 Other (please specify)

Signed by: Full name Date of birth (DD/MM/YYYY)

Signature Date signed (DD/MM/YYYY)

2nd Individual

Capacity

Individual
 Director
 Individual trustee
 Duly authorised representative (attach authority)
 Other (please specify)

Signed by: Full name Date of birth (DD/MM/YYYY)

Signature Date signed (DD/MM/YYYY)

* I declare that the Power of Attorney has not been amended or revoked. Unless previously supplied, we require a current certified copy of the Power of Attorney with specimen signatures(s) of Attorney(s).

Please return completed form to: **JBWere Investor Services**, Reply Paid 4595, Melbourne VIC 8060 or fax 1300 798 145.

For Australian dollar transfers we will process them on the same day if your valid request (by telephone, mail, internet or fax) is received by **JBWere Investor Services** by 2.00 pm (Melbourne time) and, if required, we have verified the transfer.

For further assistance please contact **JBWere Investor Services** on 1800 812 267 or email investorservices@jbwere.com

Important notice about privacy

By completing this form, you agree to the National Australia Bank (NAB) Group collecting information about you and any third party individuals whose details you have provided in this form. Your personal information will be handled in accordance with the NAB Group’s policy available at mlc.com.au.

Office use only

Signature verified Processed QA Date (DD/MM/YYYY)