ORD MINNETT

Application Instalment Plus

Please use black ink, BLOCK letters and mark [x] in the appropriate boxes.						
Facility Name						
Facility Number						
Start Date						
Monthly contribution start date:	/ /					
Amounts Initial Investment (Important: Please ensure that your loan and contribution amounts meet the managed fund(s) minimum investment requirements. Minimum amounts vary depending on individual Fund Manager requirements)						
(a) Initial Contribution	\$	(minimum \$1,000)				
(b) Initial Loan	\$					
(c) Initial investment = (a+b)	\$	(minimum \$3,000)				
Payment option for the Initial Contribution	on (please mark [x] in one (1) box	x)				
Direct debit from Nominated Account						
Cheque made payable to Leveraged Equities						
Loan drawdown against the Secured Portfolio						
Regular Monthly Investment Your regular Monthly Contribution will be debited from your Nominated Account. If you wish to nominate a different bank account for your regular Monthly Contribution, please complete the Nominate/Remove Bank Account - Direct Debit form.						
(a) Monthly Contribution	\$	(minimum \$250)				
(b) Monthly Loan	\$	(minimum \$250)				
(c) Monthly Investment = (a+b)	\$	(minimum \$500)				

Investment Selection

How the investment is to be allocated between each of your chosen managed funds.

Managed Fund	APIR Code*	Investor Name	Initial Investment	Monthly Contribution (D)	Monthly Loan (E)	Total Monthly Investment (D+E)
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
					TOTAL	\$

^{*}Please refer to the Acceptable Investments List for the correct fund names and APIR codes.

Agreement, the Direct Debit Service Agreement and the Pr	rivacy disclosure and Consent.
Borrower(s)	
Borrower 1/Director 1/Sole Director	Borrower 2/Director 2/Secretary
Print full name	Print full name
Signature	Signature
Date / /	Date / /
Guarantar(s)	
Guarantor(s)	
Guarantor 1/Director 1/Sole Director Print full name	Guarantor 2/Director 2/Secretary Print full name
Fillit full flame	Fillit luli fidille
Citathur	Older advised
Signature	Signature
Date / /	Date / /
Nominated Account holder(s) (other than the Borrower(s))	must sign below:
Bank Account Holder's Signature	
Bank Account Holder 1	Bank Account Holder 2
Print full name	Print full name
Signature	Signature
Date / /	Date /
	, ,

By signing this Instalment Plus Application Form, each Borrower and Guarantor acknowledges that they have read and understood the Ord Minnett Margin Loan PDS (including the risks), the Ord Minnett Margin Loan Product Guide, the Mortgage terms, the

Please complete and return to:

Acknowledgements

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Ord Minnett Margin Lending GPO Box 5388, SYDNEY NSW 2001