

Direct Credit of Dividends and Distributions

Complete this form using black ink, CAPITAL LETTERS and mark [x] in the appropriate boxes.

1 Facility Details	s and Securit	y Owner De	etails
Borrower name			
Loan account number			
Holder Identification Nur	mber (HIN)		
Registered Name of the Security Owner for this H	IIN		
2 Investments (select one op	otion only)	
Apply to existing (ho Portfolio; or	lding balance greate	er than zero) and a	any new CHESS eligible investments held on this HIN as part of the Secured
Only apply to new Cl	HESS eligible investr	nents held on this	s HIN as part of the Secured Portfolio.
3 Bank Details			
Credit Direct Investn	nent Loan Facility; o	r Pa	ay Nominated Bank Account (Provide details below)
Name of Australian Financial Institution			
Account Name			
BSB		Account Number	
4 Acknowledge	ment and Exe	ecution	
By signing this form, the	Security Owner conf	firms that instruct	tions provided in sections 2 and 3 will:
Override previous inst Remain in place until		_	sistry; and led to the Sponsor of the HIN or the Share Registry.
Signature Owner 1 (individual)			Signature Owner 2 (individual)
Full Name of Security Owner 1			Full Name of Security Owner 2
Date			Date
/ /			

Submit this form by:

Mail: Leveraged, GPO BOX 5388, Sydney NSW 2001 Email customerservice@leveraged.com.au

For any enquiries please contact us on 1300 307 807

Proudly part of



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information to them, read the Product Disclosure Statement and Product Documentation available online at leveraged.com.au. Lending criteria may apply.