

## **Direct Credit of Dividends and Distributions**

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

· Can be used for the Margin Loan Facility or Investment Funds Multiplier (IFM) Facility.

1 Facility Details	and Security Owner D	etails			
Borrower name					
Loan account number					
Holder Identification Num	ber (HIN)				
Registered Name of the Security Owner for this HI	N				
2 Investments (s	select one option only)				
Apply to existing (hold Portfolio; <b>or</b>	ding balance greater than zero) and	I any new CHESS elig	ible investments held	I on this HIN as part of the S	ecured
Only apply to new CH	ESS eligible investments held on th	nis HIN as part of the	Secured Portfolio.		
3 Bank Details					
Credit Margin Loan Fa	acility; or Pay Nomin	ated Bank Account (F	Provide details below	)	
Name of Australian					
Financial Institution					
Account Name					
BSB	Accour Numbe				
4 Acknowledgen	nent and Execution				
By signing this form, the S	Security Owner confirms that instru	ctions provided in se	ctions 2 and 3 will:		
	uctions on record with the Share R				
<ul> <li>Remain in place until s Signature Owner 1 (individual)</li> </ul>	uch time new instructions are prov dual)		of the HIN or the Shar nature Owner 2 (indiv		
F !! N					
Full Name of Security Own	ner 1	Full	Name of Security Ov	wner 2	
O			/ <del>-</del>		
Company/Trust: indicate			mpany/Trust: indicat		
Director Sole	e Director and Secretary Trusto	ee	Second Director	Company Secretary	Second Trustee
Date		Da	te		
	/		/	/	
Submit this form by:					

Mail: Leveraged, GPO BOX 5388, Sydney NSW 2001

Email: customerservice@leveraged.com.au

For any enquiries please contact the Customer Service Team on 1300 307 807

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