

# REDEMPTION FORM

## Important information:

Please ensure this form is signed by existing account signatories in accordance with current operating instructions.

- Mail your completed form to:  
RBC I&TS  
C/- Shareholder Services  
GPO Box 4471  
Sydney, NSW 2001
- Cut off time for receipt of a redemption request is 11am Melbourne time. If it is a non-melbourne business day then the following business day's unit price will be applied.
- A minimum withdrawal amount of \$5,000 applies.
- Redemption requests are usually processed within three Melbourne business days of receipt. Under each fund's constitution, longer periods may apply.
- Redemption instructions can be faxed to +612 8262 5492.
- If you require any assistance with completing this form please contact the Client Services Team on 1800 679 541

## Section 1. Investor details

**Investor account number**

**Account name**

**Email**

- Email consent** - by ticking this box, you agree that we will use this email address to provide you with information about your investment (including reports and confirmations). We will not divulge your email address to any third parties.

## Section 2. Payment instructions

**Direct credit**  (must be an accessible Australian bank/financial institution)

**Branch number (BSB)**

**Account number**

**Account name**

**Institution name**

**Branch name**

**Note: Payments can only be made to accounts held in the investor name. No third party payments are made.**

### Section 3. Redemption details

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Please list the Fund's for redemption below:

Full Redemption	Unit Redemption	Redemption amount
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

Total amount \$

**Note: If a redemption request results in you holding less than the minimum balance, we may treat your redemption request as being for the whole of your investment in that fund. Please refer to our PDS for further detail.**

### Section 4. Investor signature(s)

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**Signature of individual/Director/Secretary/Sole Director/Sole Secretary**

Name

Signature

Date (dd/mm/yyyy)

**Signature of individual/Director/Secretary/Sole Director/Sole Secretary**

Name

Signature

Date (dd/mm/yyyy)