

# Withdrawal request form

#### **Bennelong Market Neutral Fund**

#### This form can be used to request a full or partial withdrawal from the Bennelong Market Neutral Fund.

This is an electronic form, so you can type directly into the provided boxes. If you prefer to handwrite your information, please use capital letters and black or blue ink, and mark boxes with an X. If you make an error, initial the change. Do not use correction fluid.

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If you have any questions, contact Bennelong Funds Management **Client Experience** on **1800 895 388 (Australia)** or email client.experience@bennelongfunds.com.

If you are providing new bank details, you must sign this form in wet ink (i.e. with an original signature, not scanned or photocopied) and send it back to us via post. You cannot email or fax it.

Once you have completed this form, please post, fax or email it to:





Apex Fund Services Pty Limited Attention: Unit Registry PO Box 189 Flinders Lane Melbourne VIC 8009 Apex Fund Services Pty Limited 02 9475 1417

Attention: Bennelong Funds Management Ltd client.experience@bennelongfunds.com

Our Administrator must receive your completed withdrawal instructions by 4.00 p.m. EST on a Business Day falling at least 28 days prior to a Valuation Day (last Business Day of each calendar month). Units will be redeemed after close of business on a Dealing Day (1st business day of the following month) at the price applicable as at the close of business on that Valuation Day. A six month minimum holding rule applies.

Redemption proceeds will be processed by the Administrator on behalf of the Trustee as soon as practicable after the Dealing Day but no later than 21 days after the Dealing Day. Please see the Bennelong Market Neutral Fund Product Disclosure Statement (PDS) for more information about redemptions.

**Note:** All information provided is in accordance with the Privacy Act 1988 and its amendments. Bennelong Funds Management's Privacy Policy is available on our website (bennelongfunds.com/privacy) or by contacting Client Experience.



### Investor details

Investor number	Account name
Company or trust name (if applicable)	
Mobile	Phone (alternate)
Email	

### Withdrawal instructions

Select whether you wish to make a full or partial withdrawal from the Fund.

If partial, specify the dollar amount **OR** number of units you would like to withdraw. **As outlined in the Fund's PDS, redemption requests must be for a minimum specified below.** If this request results in you holding less than the minimum investment amount, we may treat this request as being for all of your units.

Fund name	APIR Code	awal type Partial	Amount	No. of units	Min. withdrawal amount
Bennelong Market Neutral Fund	BFL0016AU		\$		\$25,000

## Payment details

Select one of the options below. Note we can only send withdrawal proceeds to an Australian financial institution account.

Direct credit my current pre-nominated account; OR

Direct credit the new account nominated below

The bank account must be held in the investing entity's name, domiciled in Australia and denominated in Australian dollars.

If you are nominating a new bank account you must post this original signed form to us. You cannot fax or email it, or post a photocopy.

#### Australian financial institution/bank

BSB number

Account number

Account name



## Declaration and signatures

The investor or another person appropriately authorised to sign on the investor's behalf must sign this form. If this form is signed under a Power of Attorney, the attorney declares he/she has not received any notice of revocation of that power (a certified copy of the Power of Attorney must be submitted with this form unless we have previously sighted it). If this form is executed by a company, the form must be executed in accordance with the company's constitution and the Corporations Act 2001 (Commonwealth) and its amendments, or under the hand of an authorised officer or attorney who has not received notice of any revocation.

We cannot process withdrawals until we have cleared application monies and completed all necessary documentation.

#### This form must be signed by all authorised signatories.

- I/We hereby request to withdraw the above amount or units from my account and to have the amount paid as specified.
- I/We declare that I/we have read, understood and agreed to the terms and conditions contained within the Fund's PDS and any related incorporated material to which this withdrawal request form applies.
- I/We declare all the details given in this form are correct and true.

Signature of investor 1 or company officer	Date
Print full name	
Capacity	
Individual	Trustee
Joint investor	Sole director
Sole trader	Director
Partner	Agent of the investor
Signature of investor 2 or company officer	Date
Print full name	
Capacity Individual	Trustee
Joint investor	Sole director
Sole trader	
Partner	Agent of the investor
Company seal (if applicable)	