

WITHDRAWAL FORM



Fund Administrator



Responsible Entity
and Trustee

If you require further assistance, please do not hesitate to contact **Apex Fund Services** on 1300 133 451 or via email registry@apexgroup.com





INVESTMENT DETAILS

Investor Name

Investor Number

Contact Number

WITHDRAWAL DETAILS

Fund Name

Units

Dollars

All Units

<input type="text"/>	<input type="text"/>	or	<input type="text"/>	or	<input type="text"/>
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PAYMENT DETAILS

Pay to the nominated bank account on file

Pay to new bank account (please provide details below)

Account Name

BSB Number

Account Number

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Name of Financial Institution

Please attach a copy of your bank statement so that we can verify the details provided above.

DECLARATION AND SIGNATURE

- Please sign this form below. This form must be signed as per the current signing instructions that we have on record.
- If signed under power of attorney, the attorney certifies that he/she has not received notice of revocation of the power of attorney. Please include a certified copy of the power of attorney, if it has not been previously provided, to Apex Fund Services Pty Ltd.

Signature 1

Signature 2

Name

Name

<input type="text"/>	<input type="text"/>
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Title

Title

<input type="text"/>	<input type="text"/>
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Signature

Signature

<input type="text"/>	<input type="text"/>
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Date

Date

<input type="text"/>	<input type="text"/>
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Please return completed forms to Apex Fund Services via mail, fax or email.

Mail: Apex Fund Services – Unit Registry
Box 4968, Sydney NSW 2001

Email: registry@apexgroup.com GPO
Fax: +61 9251 3525

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