

# Change Of Details Form

Ironbark Asset Management (Fund Services) Limited ('Ironbark') (ABN 63 116 232 154 AFSL 298626) is the responsible entity of the fund(s). Spire Capital Limited ('Spire') (ACN 141 096 120 AFSL 344365) is responsible for providing client services for the fund(s).

**Privacy Collection Notice:** When you provide information or instructions to Ironbark or Ironbark's service providers or delegates, Ironbark and Ironbark's service providers or delegates will be collecting personal information about you. This information is needed to facilitate, administer, and manage your investment, and to comply with Australian taxation laws and other laws and regulations. Otherwise, your application may not be processed or Ironbark and Ironbark's service providers or delegates will not be able to administer or manage your investment. You should refer to the Ironbark Privacy Policy for more detail about the personal information that Ironbark collects and how Ironbark collects, uses and discloses your personal information which is available on the Ironbark website at [www.ironbarkam.com/privacy-policy/](http://www.ironbarkam.com/privacy-policy/).

## Guide to completing this form

- Your instruction on this form will override any instructions previously recorded for your account(s).
- Mark appropriate boxes with a cross i.e.

### Use this form to:

### Complete Section:

- |  |                   |
|--|-------------------|
| <ul style="list-style-type: none"> <li>• <b>Amend your address, contact details and correspondence preference on your account</b><br/>This change will apply to all your accounts which are linked to the investor account ID in Section 1. If you are unsure which accounts are linked, please contact Ironbark Client Services.</li> </ul>   | <b>1, 2 and 9</b> |
| <ul style="list-style-type: none"> <li>• <b>Provide your Tax File Number ('TFN') or Australian Business Number ('ABN')</b></li> </ul>  | <b>1, 3 and 9</b> |
| <ul style="list-style-type: none"> <li>• <b>Update your distribution preference</b></li> </ul>   | <b>1, 4 and 9</b> |
| <ul style="list-style-type: none"> <li>• <b>Update your nominated bank account</b></li> </ul>  | <b>1, 5 and 9</b> |
| <ul style="list-style-type: none"> <li>• <b>Add third party authorities, other than your financial adviser, to receive communications and/or request information on your account(s)</b><br/>This change will apply to all your accounts which are linked to the investor account ID in Section 1. If you are unsure which accounts are linked, please contact Ironbark Client Services.</li> </ul> | <b>1, 6 and 9</b> |
| <ul style="list-style-type: none"> <li>• <b>Update appointed financial adviser</b><br/>This change will apply to all your accounts which are linked to the investor account ID in Section 1. If you are unsure which accounts are linked, please contact Ironbark Client Services.</li> </ul>  | <b>1, 7 and 9</b> |
| <ul style="list-style-type: none"> <li>• <b>Appointing a Power of Attorney (POA)</b></li> </ul>  | <b>1, 8 and 9</b> |

## Contact details

Return your completed Change of details form to Apex Fund Services Pty Ltd (the 'Unit Registry') via email.

### Unit Registry Mailing Information:

Apex Fund Services Pty Ltd  
Client Services Registry Team  
GPO Box 4968 Sydney NSW 2000

### Spire Client Services

Phone: (02) 9047 8800

Email: [SSG.AUS@apexgroup.com](mailto:SSG.AUS@apexgroup.com)

## 1. Investor details

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Investor Account ID(s) \_\_\_\_\_

**If you wish to update more than 1 account, please provide the Account IDs for all accounts.**

Account name(s) \_\_\_\_\_

Fund name (s) \_\_\_\_\_

## 2. New correspondence details and preference

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### Contact details

Telephone (home): \_\_\_\_\_ Telephone (work): \_\_\_\_\_

Mobile: \_\_\_\_\_ Email address: \_\_\_\_\_

### Primary address (cannot be a PO Box)

C/- (if applicable): \_\_\_\_\_

Street number and name: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

### Postal address

Is the postal address the same as your primary address?

Yes, postal address is the same as primary

No (Please complete below)

C/- (if applicable): \_\_\_\_\_

Street number and name: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

Generally, all correspondence regarding your investment (**including investor statements**) will be sent to you via email. Please confirm your preferred email address for future correspondence regarding your investment (including the email address of yourself, financial adviser, agent if applicable).

Email address 1: \_\_\_\_\_

Email address 2: \_\_\_\_\_

Email address 3: \_\_\_\_\_

By providing my/our email address, I/we agree to receive updated disclosure documents and confirmation of transactions and additional information as applicable via email.

If you would prefer to receive communication by mail, please indicate (X):

I would prefer to receive communication by mail to the postal address provided above.

### 3. Provide tax file number (TFN) or Australian business number (ABN)

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If you have not previously provided your TFN or ABN and wish to add it to your account, please complete this section.

TFN of Investor 1: \_\_\_\_\_ TFN of Investor 2: \_\_\_\_\_

ABN: \_\_\_\_\_

Reason for exemption

(If a foreign resident for tax purposes,  
please specify country of residence): \_\_\_\_\_

#### TFN exemption codes:

- E Investments held by pension and benefit recipients – please write the full name of the benefit you receive.  N Non-residents – please provide your country of residence for tax purposes.
- O Entities not required to lodge an income tax return – please provide the reason as to why the entity does not have to lodge an income tax return.  D Do not wish to quote TFN.
- X Other exemption – please provide another reason for your exemption.

Collection of tax file numbers is authorised, and its use and disclosure are strictly regulated by the tax laws and Privacy Act. Quotation is not compulsory, but tax may be taken out of your distribution if you do not quote your tax file number or claim an exemption. For more information about the use of tax file numbers please contact your nearest Tax Office.

### 4. New distribution option (Complete this section to change your distribution option) This will apply to all Funds, unless special instructions are supplied in an attached signed schedule.

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Reinvest

Pay to bank account in **Section 5**

### 5. New bank account details (Complete this section to change your financial institution details)

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This will be the bank account Ironbark will credit any withdrawal proceeds and distributions (if elected to be paid to a bank account).

The nominated account must be in the name of the investor(s). No third-party payments are allowed. By providing your nominated account details in this section you authorise Ironbark to use these details for all future transaction requests that you make until you provide updated information.

Warning: We are not liable for loss of funds should you provide incorrect payment information.

Australian financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Branch number (BSB): \_\_\_\_\_ Account number: \_\_\_\_\_

For Ironbark to make a payment in Australian dollar denominated currency to an international financial institution, please nominate a bank account below.

Intermediary bank name: \_\_\_\_\_

Intermediary BSB: \_\_\_\_\_

Beneficiary bank name,  
and address or  
BIC/SWIFT Code: \_\_\_\_\_

Account number of beneficiary  
bank at intermediary bank: \_\_\_\_\_

Beneficiary name(s): \_\_\_\_\_

Account number of beneficiary  
at beneficiary bank: \_\_\_\_\_

**6. Add third party authorities, other than your financial adviser, to receive communications and/or request information on your account(s)**

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Complete and select one or both options.

Receive your communications including periodic statements, and/or

Request information on your account

Name: \_\_\_\_\_

Street number and name \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

**Postal address**  
(if different from above)

Street number and name \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Relationship to investor \_\_\_\_\_

This change will apply to all your accounts which are linked to the investor number previously provided. If you are unsure which accounts are linked, please contact us.

## 7. Update appointed adviser details

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Cross this box if you wish to remove your existing financial adviser on file.

### **7.1 New Adviser Details**

Name of the advisory firm: \_\_\_\_\_

Adviser group AFSL number: \_\_\_\_\_

Name of the dealer group: \_\_\_\_\_

Name of the adviser: \_\_\_\_\_ Telephone (business hours): \_\_\_\_\_

Email address of adviser \_\_\_\_\_

Email address of adviser \_\_\_\_\_

Email address of adviser \_\_\_\_\_

Postal address \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

### **7.2 New Dealer Group Details**

Cross this box if the Dealer group name, AFSL, company address and contact details are the same as in Section 7.1. If different, please complete the below.

AFSL number: \_\_\_\_\_

Postal address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact number: \_\_\_\_\_

## 8. Power of Attorney (complete if applicable)

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Complete this section if you are appointing a Power of Attorney (POA).

I am an agent under a Power of Attorney or the investor's legal or nominated representative, and have provided/confirm:

- The POA document is an original or certified copy;
- The POA document has been signed by the investor(s);
- The POA document is current and complete; and
- The POA document permits the attorney/agent (you) to transact on behalf of the investor(s)

The appointed Power of Attorney can do the following things in respect of my/our investments in the fund(s):

- Change my/our account details relating to my/our investment in the fund(s);
- Obtain details of my/our investments in the fund(s);
- Issue investment and/or withdrawal instructions on my/our behalf relating to my/our investments in the fund(s); and
- Issue instructions as to how my/our investment distributions are to be paid.

*The Attorney declares that they have not received notice of revocation of that Power of Attorney (a certified copy of the Power of Attorney is required to be submitted with the Application Form).*

*The investor(s) acknowledge and agree, without limitation, to release, discharge, and agree to indemnify Ironbark from and against any and all losses, liabilities, actions, proceedings, account claims and demands arising from Ironbark acting on the instructions of my/our authorised representatives, agents and/or nominees.*

Full name of POA: \_\_\_\_\_

Title of role in relation to the investor(s)<sup>1</sup>: \_\_\_\_\_

Signature(s) of POA:  
(Wet signature required)

<sup>1</sup>Role in relation to the investor can be but not limited to: Accountant, margin lender, legal guardian, executor etc.

## 9. Declaration and applicant(s) signature(s)

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Please read the declarations below before submitting this form.

I/We declare/acknowledge that I/We:

- agree that joint applicants or signatories who allow either investors or signatories to give instructions in relation to an investment in the fund(s) will bind other investors or signatories for all transactions in connection with the investment, including changes to account details and transactions on the investment;
- agree that details provided to Ironbark in this form and related documents are true and correct. In the event that these details change, Ironbark will be notified promptly in writing;
- agree to indemnify Ironbark against any liabilities arising from acting on information provided with this form and related documents if unclear, false or misleading;
- agree that if there is an financial adviser appointed, that the details regarding the investment can be provided to the financial adviser named in the form, or anyone directly associated to the financial adviser's practice named in the form;
- consent to the transfer of any personal information to external third parties including, but not limited to, fund administrators, fund investment manager(s), related corporate bodies and government agencies who are located in and outside Australia for the purpose of administering the products and services for which I/we have applied as permitted by law;
- agree that Ironbark is not liable for any loss or delay as a result of an electronic communication not received by the Unit Registry;
- Ironbark is not responsible for processing delays as a result of me/us failing to provide correct bank account information (please note Ironbark is unable to pay to third party accounts);
- Ironbark may need to contact me/us to verify my/our account details before processing the withdrawal request, which may cause a delay in finalising my/our withdrawal.
- If Ironbark are unable to verify the signature(s) on the form, we will provide Ironbark a certified copy of our ID(s).

Signature 1

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Signature 2

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Capacity

- Director
- Company Secretary
- Primary Trustee (Individual)

- Director
- Company Secretary
- Secondary Trustee (Individual)