



Company or Trust in which investment is held – THIS MUST BE COMPLETED

Full Name(s) of Registered Holding

Account Designation

Registered Address

Postcode

Securityholder Reference Number (SRN)
Or Holder Identification Number (HIN)

A TO MERGE MULTIPLE HOLDINGS

Please use a BLACK pen. Print CAPITAL letters inside the shaded areas.

If you wish to merge two or more of your Issuer Sponsored holdings that share the same registered name and address, please print the Securityholder Reference Number (SRN) of the holdings that you wish to merge in the "FROM" box. In the "TO" box please list the SRN of the holding that you wish to retain. Once the form is completed simply return it in the enclosed reply paid envelope.

Please note that only holdings with the same names can be merged. For example, a holding for Roger Ward and a holding for Roger and Mary Ward cannot be consolidated as this would alter the names of one of the holdings.

We can not merge CHESSE holdings (the Holder Identification Number (HIN) begins with an "X") with Issuer

FROM:

TO:

FROM:

FROM:

FROM:

Where multiple holdings have differing instructions in relation to direct credit instructions, DRP participation, Tax File Number and communications options, the instructions on the SRN which appears in the above "TO" box will be the current instructions for your merged holdings. By completing this form, you authorise and consent to merging the nominated holdings and are satisfied with the standing instruction of the "TO" holding.

Please provide your mobile number for contact purposes:

Mobile Number

Contact Name

B SIGNATURE(S) OF SECURITYHOLDER(S) – THIS MUST BE COMPLETED

Securityholder 1 (Individual)

Joint Securityholder 2 (Individual)

Joint Securityholder 3 (Individual)

Sole Director and Sole Company Secretary/Director (delete one)

Director/Company Secretary (delete one)

Date ____/____/____

Signing Instructions: This form should be signed by the securityholder. If a joint holding, all securityholders should sign. If signed by the securityholder's attorney, the power of attorney must have been previously noted by the registry or a certified copy attached to this form. If executed by a company, the form must be executed in accordance with the company's constitution and the Corporations Act 2001 (Cth) (or for New Zealand companies, the Companies Act 1993).

Personal Information Collection Notification Statement: MUFG Pension & Market Services ("MPMS") advises that your personal information is collected by MPMS organisations for the administration of your investment as required or permitted by the Corporations Act 2001 (Cth) and other legislation. Some or all of your personal information may be disclosed to contracted third parties, or related MPMS companies in Australia and overseas. Your information may also be disclosed to Australian government agencies, law enforcement agencies and regulators, or as required under other Australian law, contract, and court or tribunal order. For further details about our personal information handling practices, including how you may access and correct your personal information and raise privacy concerns, visit our website at <https://www.mpms.mufg.com> for a copy of the MPMS privacy policy, or contact us by phone on +61 1300 554 474 to request a copy.