

For Perpetual: Select Investment Funds, Perpetual Income and Growth Opportunities Funds

Perpetual Investment Management Limited ABN 18 000 866 535 AFSL 234426

Change of instructions form

Please complete all pages of this form in black ink using BLOCK letters. Mark appropriate boxes with a cross like the following X. Start at the left of each answer space and leave a gap between words.

1. Investor details (must be completed)

investor number												
account name												
contact number*												
email address*												

2. Change of investor details

A. Individual and joint account holders Investor 1 (individual account holder)	3	Investo	or 2 (joint a	ccount hold	ler)		
title		title					
Mr Mrs Miss Ms	other	Mr	Mrs	Miss	Ms	other	
first name(s)		first na	me(s)				
last name		last nar	ne				
occupation		occupa	tion				
date of birth	gender	date of	birth			gender	
D D / M M / Y Y Y	male female	D D	/ M M ,	/ Y Y Y	Y	male	female
Residency status for tax purposes		Reside	ency statu	s for tax p	urposes		
Tax residency rules differ by country. What is resident of a particular country is often on the amount of time a person spends if of a person's residence or place of work tax residency can also be as a result of control of the country of the coun	en (but not always) based in a country, the location . For the United States,	tax resi on the a of a per	dent of a pa amount of a rson's resid	articular cou time a perso dence or pla	untry is ofton on spends ce of worl	•	always) based , the location nited States,
Please answer <u>BOTH</u> of the following questions:	tax residency	Please		OTH of the	following	g tax resider	псу
1. Are you a tax resident of Australia?		1. Are	ou a tax r	esident of	Australia?	?	
(complete the following details and the yes proceed to question 2 below)	no (proceed to question 2 below)	yes		e the following o o question 2 be			roceed to estion 2 below)
tax file number (TFN)		tax file	number (Tf	=N)			
	or					or	
TFN exemption code		TFN ex	emption co	ode			

^{*} If you provide your email address we will update our records accordingly. If you are updating your mobile number, we will also require certified identification.

2. Change of investor details (continued)

A. Individual and joint account holders

Investor 1 (individual account holder) Investor 2 (joint account holder) 2. Are you a tax resident of another country? 2. Are you a tax resident of another country? (complete the (complete the following details) following details) yes yes If 'yes', please list all relevant countries and provide your tax If 'ves', please list all relevant countries and provide your tax identification number (TIN) for each country. identification number (TIN) for each country. A TIN refers to the number assigned by a country for the purpose A TIN refers to the number assigned by a country for the purpose of administering its tax laws and is the equivalent of a TFN in of administering its tax laws and is the equivalent of a TFN in Australia. If a TIN is not provided, please list one of the three Australia. If a TIN is not provided, please list one of the three reasons specified below (A, B or C) for not providing a TIN. reasons specified below (A, B or C) for not providing a TIN. Country 1 Country 1 If no TIN, list reason A. B or C If no TIN. list reason A. B or C TIN TIN Country 2 Country 2 TIN TIN If no TIN, list reason A, B or C If no TIN, list reason A, B or C If there are more than two countries, provide details on a If there are more than two countries, provide details on a separate sheet and tick this box. separate sheet and tick this box. Reason A: The country of tax residency does not issue TINs to Reason A: The country of tax residency does not issue TINs to tax residents. tax residents. Reason B: I have not been issued with a TIN. Reason B: I have not been issued with a TIN. Reason C: The country of tax residency does not require the Reason C: The country of tax residency does not require the TIN to be disclosed. TIN to be disclosed. Residential address (mandatory) Residential address (mandatory) unit number street number unit number street number street name street name suburb (if relevant) or city suburb (if relevant) or city state postcode state postcode country country phone (business hours) phone (business hours) phone (after hours) phone (after hours) mobile mobile email address email address

By providing my/our email address, I/we agree to receive any information about my/our investment (such as transaction confirmations, statements (including tax statements), reports and other materials or notifications required by the Corporations Act) electronically. This may include email notifications advising me/us when new information regarding my/our investment is available for viewing online, via hyperlink or via Investor Centre. I/We acknowledge you may still need to send me/us information by mail from time to time. If you are updating your mobile phone number, we will also require certified identification.

Note: This consent does not relate to documents such as notices of meetings, voting or proxy forms or Fund annual reports.

2. Change of investor details (continued)

A. Individual and joint account holders - Postal address (optional)

Investor 1 (individu	ıal account holder)		Investor 2 (joint account holder)						
po box	unit number	street number	po box	unit number	street number				
street name			street name						
suburb			suburb						
state	postcode		state	postcode					
country			country						

Investor 1 (individual account holder) Investor 2 (joint account holder) 2. Change of investor details

B. All other account holders company name name of superannuation fund, trust, partnership, association, government body or co-operative c/po box unit number street number street name suburb state postcode country phone (business hours) mobile fax email address

Provide your email address and we will provide you with email notification of new account correspondence as it becomes available.

3. Change of authorised representative appointment

I/We have read and agree to the conditions applying to the appointment of an authorised representative as set out in the relevant Product Disclosure Statement.

You can self-service through Investor Centre to provide View only online access to that representative													
authorised repres	entative details:												
first name(s)	++++		Ш	41	+	Н	+	Н	Н	+	₽	Н	H
last name													
po box	unit number	street number											
street name													
				П	П		П	Т	П		Г		
suburb													
				Ш	П		П	Т	П		П		
state	postcode	country											
email address													
					П			Т	П				
signature of authorised representative						da	te D	D	M	M /	Υ	/ Y	Υ

4. Change of account details

You can only nominate a bank account that is held in your name(s). By providing your bank account details in this section, you accept the terms in the Direct Debit Service Agreement and authorise Perpetual to use these details for all future transaction requests that you nominate.

Bank a	account
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Complete your bank account details in this section and indicate what you would like us to use these bank account details for
withdrawals distribution payments monthly savings plan monthly withdrawal plan
name of financial institution
branch name
branch number (BSB) account number
name of account holder
signature of account holder A signature of account holder B
date D D / M M / Y Y Y

If you are updating or providing new bank details, you will need to provide a copy of your bank statement for verification purposes.

Please note section 7 of this form must also be completed.

5. Change of distribution details

Reinvest distributions for all my funds in this account.

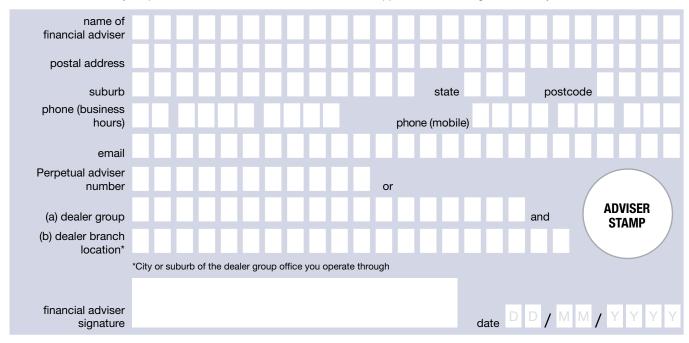
Pay all distributions to my bank account as specified in Section 4.

• If you wish to reinvest your distributions for specific investment funds within your account, please contact us on 1800 677 648.

6. Change of financial adviser

Complete this section if you are changing your financial adviser.

I/We have a new financial adviser whose details appear below. I/We acknowledge that Perpetual will hold personal information about me/us and will disclose this information to my/our financial adviser. I/We acknowledge that Perpetual will cease to disclose this personal information if I/we notify Perpetual that the financial adviser whose details appear below no longer acts on my/our behalf.



7. Investor signature(s)

- · Please sign this form where indicated below. This form must be signed as per the current signing instructions we have on record. If no amendments have been made, the current signatories for the account are the individuals who signed the initial investment application form.
- If signed under power of attorney, the attorney certifies that he or she has not received notice of revocation of the power of attorney. Please include the power of attorney (or a certified copy) with this form if it has not previously been provided to Perpetual.
- For information, please call Investor Services on 1800 677 648 during business hours (Sydney time), visit www.perpetual.com.au or email Selectqueries@cm.mpms.mufg.com

Signature of investor 1 or company officer	Signature of investor 2 or company officer
print name	print name
capacity (company investments only)	capacity (company investments only)
sole director director secretary	director secretary
date	date
D D / M M / Y Y Y	DD/MM/YYYY
Please send the completed form to:	

Perpetual Select Unit Registry Locked bag 5038 Parramatta NSW 2124

or email: Selectinstructions@cm.mpms.mufg.com