

## SECTION 6 REDEMPTION REQUEST FORM

# Auscap High Conviction Australian Equities Fund

ARSN 615 542 213

Please complete in black or blue pen and use CAPITAL letters.

1. Investor Details	
Investor Number	
Investor Name	
Investor Name	
Contact Details	
Contact Name:	Contact shares
contact name.	Contact phone:

Contact email:

#### 2. Redemption Amount (please select one)

Full Redemption – please proceed to part 3

Partial Redemption – Amount to redeem \$AUD OR Units to redeem UNITS

Note that there is no minimum redemption amount, however there is a minimum holding amount of \$10,000.



### 3. Payment of Redemption Proceeds (please select one only)

Pay into the account previously advised - please proceed to the next part 4

Pay redemption proceeds into following account - please provide details below

IMPORTANT INFORMATION: Additional security checks to verify bank account changes will be performed before the payment of your redemption proceeds if the bank account provided does not match the bank account that is currently recorded in our records under your investment, or if you have changed your bank account details.

Bank

**Branch Name** 

BSB

Account Number

Account Name

#### 4. Authorisation

I/we instruct Link Fund Solutions to effect the redemption in accordance with the completed instructions set out above.

Signature Print to sign Sign ►		Signature Print to sign Sign ►	
Print Name		Print Name	
Title (select one)	Individual Sole Director Director Trustee Partner Other	Title (select one)	Individual Sole Director Director Trustee Partner Other
Date		Date	

### 5. Post or email this form

Please **post** this completed form to:

Link Fund Solutions Pty Limited Unitholder Services Attention: Auscap Fund Unit Registry Locked Bag 5038 Parramatta NSW 2124

Alternatively you can scan and email this form to Auscap@linkmarketservices.com.au