

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

Contact Details

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.

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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 MUFG Corporate Markets to effect the redemption in accordance with the completed instructions set out above.

Signature <i>Print to sign</i> Sign ▶		Signature <i>Print to sign</i> 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. Email or Post this Form

Please **scan and email** this completed form to auscap@cm.mpms.mufg.com.

Alternatively, you can **post** this completed form to:

MUFG Corporate Markets FS Pty Ltd
Unitholder Services
Attention: Auscap Fund Unit Registry
Locked Bag 5038
Parramatta NSW 2124