

Please use this form to instruct FIIG to (please select below):

- · Authorise FIIG on your existing Macquarie Cash Management Account (please complete section 1 and provide a current bank statement.)
- Request FIIG to open a new Macquarie Cash Management Account on your behalf (please complete section 2)
- Nominate a bank account for Electronic Funds Transfer (EFT) (Section 3)
- Change how you pay custody fees (please complete section 4)
- Instruct FIIG to pay foreign coupons to a foreign currency account (please complete section 5)

clientservices@fiig.com.au				
I/we, instruct FIIG to update the fund	ling details for the following	Investment Entity or FIIG Custody	y Account as instructed:	
Investment Entity Name:				
FIIG Custody Account Number:				
SECTION 1 – AUTHORISE FIIG ON	YOUR EXISTING MACQUA	RIE CASH MANAGEMENT ACCO	UNT	
I/we grant FIIG authority over an existing Macquarie Cash Management Account I/we hold, the details of which are recorded below, in accordance with the CCIT Agreement and nominate that account as my/our Bank Account for the purposes of the Client Custody Agreement Terms and Conditions. I/we request that FIIG transact, settle and otherwise deal with this Bank Account in accordance with the CCIT Agreement. I/we request that FIIG directly debit that Bank Account in accordance with the CCIT Agreement and the Direct Debit Terms and Conditions available at www.fiig.com.au/DDterms.				
MACQUARIE BANK LIMITED				
Account name				
BSB		Account number		
You appoint FIIG to have access to this account and have general withdrawal authority to transact, settle and otherwise deal with this account on your behalf and in accordance with the CCIT Agreement. PLEASE PROVIDE A BANK STATEMENT FOR THIS ACCOUNT.				
SECTION 2 – OPEN A MACQUARIE	CASH MANAGEMENT ACC	OUNT		
I/we instruct FIIG to open a Macquarie Cash Management Account on my/our behalf in the name of the Investment Entity set out above, and grant FIIG authority over that account in accordance with the CCIT Agreement. I/we request that FIIG transact, settle and otherwise deal with this Funding Account in accordance with the CCIT Agreement. I/we request that FIIG directly debit that Funding Account in accordance with the CCIT Agreement and the Direct Debit Terms and Conditions available at www.fiig.com.au/DDterms.				
You have provided FIIG with instructions to open a Funding Account on your behalf. FIIG will prepare an online application to Macquarie Bank Limited on your behalf to open a Funding Account. You will receive an e-mail from Macquarie Bank Limited noting that FIIG has submitted an online application on your behalf for a Macquarie Cash Management Account.				

• the Macquarie Cash Management Account Product Information Statement, Further Information Guide and Fees, limits and

The Macquarie Cash Management Account will be opened in the Investment Entity Name (set out in the beginning of this form).

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• a link for you to review and submit the application.

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This e-mail will provide you with:

lodgement times documents; and

Complete the following information for all Investment Entity types						
INDIVIDUAL 1			INDIVIDUAL 2			
Given Name(s)	First	Middle	Given Name(s)	First		Middle
Surname			Surname			
Other Name			Other Name			
Salutation (Mr, Mrs) & Date of birth	Sal Date of bii	rth	Salutation (Mr, Mrs) & Date of birth	Sal Date of birth		
Occupation			Occupation			
Yes No	Is this individual an authorise instruct on this account)? Not receive copies of contract not	~		instruct on this ac	ccount)? Note	d signatory (i.e. authorised to exauthorised signatories will ss, monthly statements etc.
Australian residen	tial address		Australian residen	tial address		
Street no. & name			Street no. & name			
Suburb			Suburb			
State & postcode	State	Postcode	State & postcode	State		Postcode
Time at address	Years	Months	Time at address	Years		Months
Email Address			Email Address			
Phone	Day	Mob	Phone	Day		Mob
Postal Address (if o	dress (if different from above)		Postal Address (if different from above)			
Street no. & name			Street no. & name			
Suburb			Suburb			
State & postcode	State	Postcode	State & postcode	State		Postcode
Country			Country			
Valid driver's licen	ce details Tick if yo	ou do not have a valid licence	Valid driver's licen	ce details	Tick if yo	u do not have a valid licence
Licence no.		State	Licence no.			State
Licence card no.			Licence card no.			
Valid passport deta	Tick if you do no	t have a valid passport	Valid passport deta	ails Tick	if you do not	have a valid passport
Passport no.			Passport no.			
Issuing country			Issuing country			
Full name on Passport			Full name on Passport			
(If different from abov	e)		(If different from abov	e)		

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INDIVIDUAL 1	INDIVIDUAL 2			
Source of Funds or Wealth (must tick one only) Income (i.e., employment, investment, business, other earnings) One-off payment (i.e., matured investment, legal settlement, estate proceeds) Sale of assets (i.e., shares, property) Windfall (i.e., gifts, winnings)	Source of Funds or Wealth (must tick one only) Income (i.e., employment, investment, business, other earnings) One-off payment (i.e., matured investment, legal settlement, estate proceeds) Sale of assets (i.e., shares, property) Windfall (i.e., gifts, winnings)			
Complete the following information for Companies, Trust	s and Super Funds			
Nature of Trust, SMSF or company				
SECTION 3 – ELECTRONIC FUNDS TRANSFER (EFT)				
By ticking this option you are responsible for remitting funds purchase transactions. Any credit amounts will be paid to the no	to the FIIG Client Trust Account prior to the settlement date of minated EFT bank account.			
Bank name				
Account name				
BSB	Account number			
PLEASE PROVIDE A BANK STATEMENT FOR THIS ACCOUNT.				
SECTION 4 – UPDATE CUSTODY FEE ARRANGEMENT				
Tick the box below if you want Fees and other amounts deduct from your Bank Account. Otherwise, leave this section blank.	ed from your Distributions before such amounts are debited			
Direct debit (default option)				
Unless I/we tick the box below, I/We authorise and direct FIIG to:				
 attempt to debit my/our Bank Account nominated in Sections 1 and 2 above for the amount of any Fees, expenses, outlays and any other amounts payable by me/us under or in connection with my/our Client Custody Agreement, as my/our preferred method of paying such amounts; and 				
 to the extent such amounts cannot be recovered from my/our Bank Account after 3 attempts, to deduct such amounts from my/our Distributions in accordance with my/our Client Custody Agreement. 				
OR				
Coupon interest payments (Distribution Deductions) (de	fault option when EFT is selected above)			
I/We authorise and direct the Trustee to:				
 deduct any Fees, expenses, outlays, and any other amounts payable by me/us under or in connection with my/our Client Custody Agreement from my/our Distributions, to the extent it is reasonably practicable for the Custodian to do so; and 				
• if it is not reasonably practicable to do so, or the amount of my/our Distributions is insufficient to meet all outstanding Fees, expenses, outlays, and any other amounts payable by me/us under or in connection with my/our Client Custody Agreement, debit my/our Bank Account nominated in Section 1 and 2 above for all such outstanding amounts.				

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SECTION 5 – NOMINATE A FOREIGN CURRENCY SETTLEMENT ACCOUNT						
I/we instruct FIIG to pay foreign currency interest payments and any foreign currency sale proceeds into the below foreign currency bank account in accordance with the CCIT Agreement.						
Currency	Bank					
Account Name						
Swift Code / BIC	BSB	Sort Code				
IBAN						
For further credit information ref	erence					

FATCA - Foreign Account Tax Compliance Act

The introduction of FATCA has resulted in a number of additional due diligence and reporting requirements for non-U.S. financial institutions. The purpose of FATCA is to ensure that income tax is paid by U.S. individuals and entities where they have financial accounts outside of the U.S.

By executing and returning this form to FIIG you confirm that you, the Client/Investment Entity, are either:-

- i. An individual/joint applicant who is an Australian resident or citizen for taxation purposes and not a U.S. citizen or U.S. resident for FATCA purposes; OR
- ii. A Regulated super fund applicant (Self-Managed Superannuation Fund, APRA regulated super fund, government super fund or pooled superannuation trust).

If you cannot confirm (i) or (ii) above please contact FIIG on 1800 0101 81 or email clientservices@fiig.com.au.

Information (including client identification details and personal information) may be provided to agents appointed by FIIG to carry out relevant procedures and services, in order for FIIG and those entities to meet their obligations under the Anti-Money Laundering/Counter Terrorism Financing Act 2006 and under the Intergovernmental Agreement between the Australian and U.S. governments to improve international tax compliance and to implement FATCA. Counter Terrorism Financing Act 2006 and under the Intergovernmental Agreement ("IGA") between the Australian and U.S. governments to improve international tax compliance and to implement FATCA.

Terms defined in the Opening a FIIG Client Account Application Form ("CAAF"), including the Agreement for Opening a FIIG Client Account in Section 10 of the CAAF, the Client Custody Agreement Terms and Conditions, the Client Custody and Investment Transaction Account ("CCIT Agreement"), and the Terms and Conditions of Dealing with FIIG Securities Limited as set out in the Financial Services Guide have the same meaning as in this form.

Executed as an agreement by the Investment Entity/Client:

Note: all bank account signatories must sign here.





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