

INCOME DIRECTION FORM

Phillip Capital Limited ABN 14 002 918 247 AFSL 246827

PLEASE EMAIL COMPLETED AND SIGNED FORM TO SETTLEMENTS@PHILLIPCAPITAL.COM.AU

Account Name: _____
Name must be the same as your account name and bank account name

Account Number: _____ Holder Identification No (HIN): _____

AUTHORISATION

I/we will be CHESS Sponsored by Phillip Capital Limited (PhillipCapital) and I/we authorise CHESS and PhillipCapital to severally advise the relevant issuer or its nominee to pay by direct credit to the Nominated Bank Account (as specified below) all cash dividends, distributions, interest or income payable referable to my/our HIN (as specified above). By completing this form, whenever you purchase financial products which are CHESS sponsored by PhillipCapital, PhillipCapital will give your banking details via CHESS to the issuer's share registry. This instruction will override all previous instructions you may have given PhillipCapital or the relevant issuer. This instruction only applies to holdings sponsored by Phillip Capital Limited in CHESS. All cash dividends paid for financial products held under your HIN will be directed into the Nominated Bank Account supplied below. Note that by providing this instruction, it may override your participation in any existing Dividend Reinvestment Plans (DRP) or Bonus Share Plans. There are also no guarantees that all share registries will accept these instructions from Phillip Capital Limited.

Contact the Issuer directly for non CHESS holdings.

Financial Institution Name: _____ Account Name: _____

BSB Number: _____ Account Number: _____

1 Individual or Joint Account - where the account is held in joint names all signatories must sign

Individual 1

Given Name(s) in full: _____

Signature: _____ Date: _____

Individual 2

Given Name(s) in full: _____

Signature: _____ Date: _____

Individual 3

Given Name(s) in full: _____

Signature: _____ Date: _____

2 Companies

Authorised Signatory 1

Given Name(s) in full: _____

Signature: _____ Date: _____

Authorised Signatory 2

Given Name(s) in full: _____

Signature: _____ Date: _____

Important: Please ensure that you provide the correct banking details. Please note any changes to banking details must be notified immediately to Phillip Capital Limited. If you fail to (a) provide correct banking details or (b) immediately notify Phillip Capital Limited of changes to banking details, we may not be able to provide you with the services that you require and accept no responsibility or liability for any resulting loss, liability, cost or expense.