

ISSUED 22 MARCH 2023

Withdrawal Instructions Form Complete all relevant sections • Use a black pen **Signatures** • Print in clear CAPITAL letters · Cross boxes where needed Pendal Fund Services Limited (Pendal, 'our' or 'us' in this Form) ABN 13161249332, AFSL No. 431426 is the responsible entity or trustee of, and issuer of units, in the Pendal funds. **Investor Number** Investor Account Name - i.e. name of individual, joint investors, sole trader, company, trust or superannuation fund, association, government body, charity or religious body Contact details MR MRS MISS MS OTHER: First name Last name **Email address** Mobile phone number Work phone number **Fund name** Withdrawals Note that all withdrawal Withdrawal - specify if you are withdrawing the full amount, a number of units or a dollar amount amounts will be paid in **FULL AMOUNT** Australian dollars. UNITS: AMOUNT: **Fund name** Withdrawal – specify if you are withdrawing the full amount, a number of units or a dollar amount **FULL AMOUNT** UNITS: AMOUNT: \$

2.1	Preferred payment option	Pay to bank account Pendal currently has on file for withdrawals – Go to 3 ▶ Pay to new bank account – Go to 2.2 ▶
		Withdrawals will generally be paid to your nominated Bank Account within 5 Business Days.
2.2	New bank account details	Name of Australian financial institution
	This bank account must be an Australian financial institution account in the same name as your existing Account(s). - If you are supplying new bank account details you must provide a copy of the bank statement for verification.	BSB Account number Name of account holder Does this new bank account permanently replace the existing bank account we have on file? Yes – we will replace the details we have on file No – we will only use this account for this withdrawal
3.0	Signatures	This section must be signed in line with the account signing authority option nominated in the Application Form, or that we have on file, otherwise this Form will be considered incomplete.
3.1	Investor signature 1	Signature
		First name Date Director Director Director / Company Secretary
3.2	Investor signature 2	Signature
	If there are more than 2 required signatories, attach a separate sheet showing each signatory's first and last name, job title/role and signature.	First name Date Director Company Secretary THIS FORM IS NOW COMPLETE
	How to submit this form	Email: pendal@apexgroup.com
		Mail: Apex Fund Services Unit Registry GPO Box 4584 Sydney NSW 2001 Fax: +61 2 9251 3525