1300 346 821
pendalgroup.com

PENDAL

ISSUED 17 NOVEMBER 2026

Withdrawal Instructions Form

Complete all relevant sections

- Use a **black** pen
- Print in clear CAPITAL letters
- Cross boxes where needed

Investor (1) — Withdrawals (2) — Signatures (3)

Pendal Fund Services Limited (Pendal, 'our' or 'us' in this Form) ABN 13 161 249 332, AFSL No. 431426 is the responsible entity or trustee of, and issuer of units, in the Pendal funds.

1.0 Investor

Investor Number

Account Name – i.e. name of individual, joint investors, sole trader, company, trust or superannuation fund, association, government body, charity or religious body

1.1 Contact details

☐ MR ☐ MRS ☐ MISS ☐ MS ☐ OTHER:

First name

Last name

Email address

Mobile phone number ( )

Work phone number ( )

2.0 Withdrawals

Note that all withdrawal amounts will be paid in Australian dollars.

Fund name

Withdrawal – specify if you are withdrawing the full amount, a number of units or a dollar amount

☐ FULL AMOUNT

☐ 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

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.

Name of Australian financial institution

Branch

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 | **Last name**

Date (D D M M Y Y Y Y) | **Director** ☐ | **Sole Director / Company Secretary** ☐

3.2 Investor signature 2

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.

Signature

First name | **Last name**

Date (D D M M Y Y Y Y) | **Director** ☐ | **Company Secretary** ☐

THIS FORM IS NOW COMPLETE

How to submit this form

Email: pendal@apexgroup.com

Mail: Apex Fund Services Pty Ltd GPO Box 4584 Sydney NSW 2001

Fax: +61 2 9251 3525