

Additional Application Form

Use this form if you are an existing investor and wish to make an additional investment. Please complete all sections in BLOCK letters and using a black pen. If you make an error while completing this form, do not use correction fluid, cross out your mistake and initial your changes.

HOW TO COMPLETE THIS FORM

Step 1	Read and ensure you understand the applicable Product Disclosure Statement (PDS) for the Fund you are making an additional investment in.
	The PDS is available on our website <u>www.australianunity.com.au/wealth</u> . If you are unable to access the link or print the document, contact us on 1300 997 774.
Step 2	Please ensure you have completed the following:
	 written your account number and account name as it appears on the latest statement
	 written the amount in Australian dollars
	 selected the payment method you would like to use
	 signed the form as per the 'Signing instructions' in section 5
Step 3	Send your documents to us.
	You can return your forms by post or email according to the details below:
	Send by post:
	Australian Unity
	GPO Box 804
	Melbourne VIC 3001
	Scan and email to: australianunitywealth_transactions@unitregistry.com.au
Step 4	Transfer your application money to us.
	Please refer to section 4 'Payment of application amount'.

SECTION A: INVESTOR ASSESSMENT

The following questions assist Australian Unity in meeting its regulatory obligations by enabling it to assess whether this financial product is being offered to the stated target market.

Mandatory questions are marked*

Question 1. Investor Status*						
Please s	elect one of the following options:					
	I am/We are investing at least \$500,000					
	Please continue to Section B: Financial Adviser Details if you have an adviser.					
	I am/We are a Wholesale Client and will provide a copy of my/our Wholesale Certificate with my/our application. I/we confirm that the product we are applying for in this application will not be used in connection with a business. Date of certificate: Please attach an accountant's certified prepared <u>Wholesale Certificate</u> , prepared in accordance with Section 761G of the Corporations Act (the certificate must have been signed less than two years from the date of this application). Please continue to Section B: Financial Adviser Details if you have an adviser.					
	I am/We are a professional investor' as defined by the Corporations Act.					
	Please select the applicable option below:					
	A person who controls at least \$10,000,000 (Please attach supporting documentation with your application); or					
	A trustee of a superannuation fund (within the meaning of the Superannuation Industry (Supervision) Act 1993)					
	and the fund has net assets of at least \$10,000,000 (Please attach supporting documentation with your application); or					
	An Australian Financial Services Licensee - AFSL Number:					
	Note: If you are investing as a 'professional investor' we cannot process your application until we have verified the supporting documentation provided with your application.					
	Please continue to Section B: Financial Adviser Details if you have an adviser.					
	I am we/are not a Wholesale Client with a Wholesale Certificate.					
	Please continue to Section B: Financial Adviser Details if you have an adviser.					
More Information						
What is a Wholesale Client?						
A Wholesale Client is defined in the Corporations Act and includes an investor:						
• p	• purchasing a financial product where the value of the product is above the prescribed threshold of \$500,000 in a single transaction; or					
	ith certified net assets of at least \$2,5000,000 or who had a gross income for each of the past two financial years of at least 250,000 (as certified by a qualified accountant); or					
	ho qualifies as a 'professional investor'. This includes AFS licensees, listed entities, banks and friendly societies, and other entities that may be resumed to have expertise or access to professional advice to justify their being treated as wholesale.					
Curren	t AU Wholesale certificate template					

Question 2. Financial Advice*

Have you received current personal financial advice in relation to this application and is this application necessary to implement such personal financial advice?

Yes - Please continue to Section B: Investor Details and complete the Financial Adviser Details section.

No - Please note you will only be able to add to your existing financial product. If you select a new financial product then we are unable to accept your application. Should your financial circumstances change, we welcome you to re-apply.

SECTION B: FINANCIAL ADVISER DETAILS

Use this section to tell us about your financial adviser. If you change your financial adviser, it's important to let us know in a timely way. If you would like your financial adviser to receive copies of your statements by email, please enter their email address below.

etails			
SL holder name	AFSL	number	
lviser name			
lvisor code or Authorised representative number	ABN		
operty/building name			
it Street number Street name			
burb	State	Postcode Cou	intry
one	Mob	le	
rformance of investor identification & verification pro			
ease indicate below whether client identification and vert \neg	rification procedure	s have been performed.	
No - I have not performed the applicable custom	ner identification pr	ocedure on this investor.	
Yes - I have completed the applicable customer i	identification proce	dure on this investor.	
ancial adviser declaration			
Notice to financial adviser: please note that reliance on pelow is met.	the KYC performed	by the financial adviser is	only acceptable if all the criteria
I hold an AFSL in my own name or have been appoi	inted as an authoris	ed representative by the lic	censee.
I am a reporting entity for AML/CTF purposes.			
The issuer has reasonable grounds to believe that it	t is appropriate to r	by on the KYC procedure I	have undertaken
		by on the Krc procedure r	nave undertaken.
I have attached the KYC documents to this form.			
		AFSL number	

Account number

|--|

Investor name

2. INVESTMENT DETAILS AND DISTRIBUTION INSTRUCTIONS

Please specify the amount(s) you wish to invest.

If you have received current personal financial advice and provided your financial adviser's details then you may invest in any fund in the list.

Or if you qualify as a Wholesale Client and provided supporting documentation then you may invest in any fund in the list.

However, if you have not received current personal financial advice or do not qualify as a Wholesale Client then you are only able to add to your existing funds.

If you are an existing unit holder in the fund for which you are applying, the distribution choice below will override any pre-existing election. If you have not previously provided your bank account information, please complete a Change of Details form. If you do not make an election and have not made one before, distributions will be reinvested.

Fund name	APIR	Investment amount	Distribution option (indicate (X) one option per fund)	
		(Minimum AUD \$5,000}	Pay to my bank a/c	Reinvest
Australian Unity A-REIT Fund	AUS0055AU			
Australian Unity Balanced Growth Portfolio	AUS0100AU			
Platypus Australian Equities Fund	AUS0030AU			
Pro-D Balanced Fund	AUS0066AU			
Pro-D Growth Fund	AUS0068AU			
Pro-D High Growth Fund	AUS0064AU			

3. OTHER INSTRUCTIONS

If you wish to change your other instructions (such as your reporting preferences, Financial Adviser information, or contact details), please complete the relevant form, available from our website <u>www.australianunity.com.au/wealth/forms</u>.

4. PAYMENT OF APPLICATION AMOUNT

Select your payment method and complete the relevant section if applicable. All payments must be made in AUD.

EFT

Direct Debit BPay®

EFT	Electronic Funds Transfer
Account name:	OFS ARF Australian Unity Funds Management Ltd Application Trust Account
BSB:	083-001
Account number:	765189036
Your reference:	[please use the name of the investor and investor number]

Direct debit authority - Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

We use OneVue Fund Services Pty Ltd as our external service provider to process your application and payment. By completing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and OneVue Fund Services Pty Ltd, as set out in this request and in your Direct Debit Request Service Agreement.

Financial institution name	Branch name
Account name	
BSB number	Account number

I/We request and authorise OneVue Fund Services Pty Ltd as agent for Australian Unity Funds Management Limited ABN 60 071 497 115 (User ID 623200) to arrange, through its own financial institution, a debit to the nominated account as deemed payableby our administrator.

Signature of primary account holder

Please print full name

Date Sig	ned (l	DD/N	IM/Y	(YY)	
	/		/		

Signature of joint account holder (if applicable)

Please print full name

Date Signed (DD/MM/YYYY)



BPAY ® – Telephone & internet banking

You can make your payment using telephone or internet banking.	Fund BPAY details			
You will need to quote the biller code and your account number (for reference) when making this payment.	[Fund name] Biller code [insert] Reference number [account number]			
If this is a new investment, we will notify you of your account number once this is available. Please make your payment within 14 days of this notification.	Contact your bank or financial institution to make this payment from your cheque, savings, debit or transaction account. More info <u>www.bpay.com.au</u> ®Registered to BPAY Pty Ltd ABN 69 079 137 518			
Fund name	BPAY [®] details			
Australian Unity A-REIT Fund	Biller code: 339226 Reference number: Investor number			
Australian Unity Balanced Growth Portfolio	Biller code: 362566 Reference number: Investor number			
Platypus Australian Equities Fund	Biller code: 339218 Reference number: Investor number			
Pro-D Balanced Fund	Biller code: 339200 Reference number: Investor number			
Pro-D Growth Fund	Biller code: 339275 Reference number: Investor number			
Pro-D High Growth Fund	Biller code: 339143 Reference number: Investor number			

5. SIGNING INSTRUCTIONS

When you apply to invest, you (the applicant) are telling us:

- you have received, read and understood the current PDS
- monies deposited are not associated with crime, money laundering or terrorism financing, nor will monies received from your account have any such association
- you are not bankrupt or a minor
- you agree to be bound by the constitution of the Fund and the PDS as a supplemented, replaced or re-issued from time to time; and
- if you are a Wholesale Client, you have/will provide Australian Unity with valid supporting documentation.

Individual - where the investment is in one name, the account holder must sign.

Joint Holding - where the investment is in more than one name, all of the account holders must sign.

Companies - where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust – the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney – if you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document of the Power of Attorney. I/we attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

Signature of investor 2, director/company secretary or authorised signatory
Signature
Please print full name
Date Signed / / / / / / / / / / / / / / / / / / /
Company officer (please indicate company capacity)
Director
Company Secretary
Authorised Representative