



## FRANKLIN TEMPLETON INVESTMENTS

### APPLICATION FORM

This is an Application Form for the **W class units** in the Funds (“**Units**”) issued by Franklin Templeton Investments Australia Limited (ABN 87 006 972 247, AFS Licence Number 225328) (“**FTIAust**”). Please refer to Section 3 of this Application Form for the list of these Funds.

This Application Form accompanies the Product Disclosure Statement for the relevant Fund (“**PDS**”). It is important that you read the PDS in full, and this Application Form (including the Declarations and/or Acknowledgements section), before applying for Units.

Information in the PDS may change from time to time. You can access a copy of the latest version of the PDS and the Application Form free of charge from our website [www.franklintempleton.com.au](http://www.franklintempleton.com.au) or by contacting us.

Any person who gives another person access to this Application Form must, at the same time and by the same means, give the other person access to the PDS.

Defined terms in the PDS have the same meaning in this Application Form. This Application Form may be rejected by FTIAust for any reason, including if it is incomplete.

### Contact details

Franklin Templeton Investments Australia Client Services team

#### Offices

##### Melbourne

Level 19  
101 Collins Street  
Melbourne, VIC 3000

##### Sydney

Level 30, Aurora Place  
88 Phillip Street  
Sydney, NSW 2000

#### Toll free Number

1800 673 776

#### Email

[ftclientservices@franklintempleton.com](mailto:ftclientservices@franklintempleton.com)

#### Website

[www.franklintempleton.com.au](http://www.franklintempleton.com.au)

#### Operating Hours

Our operating hours are from 9.00am to 5.00pm, Monday to Friday except for Victorian public holidays.

### How to submit your Application Form

#### New investors

##### Post original to:

Link Market Services Limited  
PO Box 3721  
Rhodes, NSW 2138  
Attention: MFO Registry Operations

#### Existing investors making an additional application

##### Please fax to:

Link Market Services Limited  
Attention: MFO Registry Operations  
Fax: 02 9287 0367

Or post original to the address shown on the left

The following information is provided to assist you in completing and lodging this Application Form. Please read this section before completing this Application Form.

To make an investment, please complete all applicable sections of this Application Form, sign it and submit the necessary identification documents. Please refer to the 'What Investor Type Are you?' section on page 5 for guidance on the sections of this Application Form to be completed.

### Signing the application

Please read the declarations and acknowledgements in **Section 10** carefully before signing this Application Form. Each investor on the investment account must sign this Application Form.

If signing under a power of attorney, you must attach a certified copy of the power of attorney document (unless already held by us) and a specimen signature of the attorney.

### Quoting an Australian Tax File Number (TFN)

You can decide whether you wish to quote your TFN in this Application Form. It is not an offence to not quote your TFN. If we do not receive your TFN, ABN, or appropriate exemption information, we will withhold tax at the highest marginal tax rate (plus the Medicare levy) from income distributions made to you.

### Investing on behalf of a superannuation fund

If you indicate that an investment is made on behalf of a superannuation fund we will consider the superannuation fund to be a complying fund under the *Superannuation Investment Industry (Supervision) Act 1993*.

### New Investors

Please mail the duly completed original Application Form together with the relevant identification documents to Link Market Services Limited ("**Link**") at the postal address:

Link Market Services Limited  
P.O. Box 3721  
Rhodes, NSW 2138  
Attention: MFO Registry Operations

Applications, including the relevant identification documents, need to be received and appropriate funding provided to the bank account specified in **Section 4** before 12 noon on a Business Day to be eligible to receive the application price applicable to that Business Day.

Payment can be made either by (i) a fund transfer to the bank account specified in **Section 4** of this Application Form – please mail a copy of the payment advice confirming the funds transfer together with the completed Application Form; or (ii) mailing a cheque crossed "Not negotiable" and made payable to "Franklin Templeton Investments Australia Limited Applications Account" together with the completed Application Form to the postal address stated on the first page of this Application Form. Please refer to **Section 4** for further details.

Joint applicants will be treated as holding their Units as joint tenants, unless otherwise agreed with FTIAust.

### Existing Investors

**For existing investors making additional applications**, please arrange to transfer application money to the bank account specified in **Section 4** of this Application Form and arrange to fax a copy of the payment advice confirming the funds transfer along with the duly completed Application Form to the following fax number:

Link Market Services Limited  
Attention: MFO Registry Operations  
Fax: 02 9287 0367

If you wish to pay by cheque, please mail your cheque crossed "Not negotiable" and made payable to "Franklin Templeton Investments Australia Limited Applications Account" together with the completed Application Form to the following postal address:

Link Market Services Limited  
P.O. Box 3721  
Rhodes, NSW 2138  
Attention: MFO Registry Operations

Please note that the application will only be deemed to have been received by FTIAust when cleared funds have been received. Cash cannot be accepted. FTIAust does not accept or make third party payments.

We may reject an application in the Fund in whole or in part without giving any reason for the rejection.

Application Forms need to be received and cleared funds must have been received in the bank account specified in **Section 4** before 12 noon on a Business Day to be eligible to receive the application price applicable to that Business Day.

Application monies will be received into an application holding account. If any interest is earned in relation to the application holding account, this interest is not payable to the investor and will be kept by us.

Unless we agree otherwise, you must maintain a minimum holding balance of AU\$10,000.

### Investing in the Fund via an IDPS

If you are investing through an IDPS Service you should complete the application form supplied by the IDPS Operator and refer to your IDPS Guide for further details. The timing for processing and pricing of your application into the IDPS Service will be dependent on the requirements of the IDPS Service. You should refer to your IDPS Guide for further details.

When Indirect Investors invest through an IDPS Service they are directing the IDPS Operator to arrange for their money to be invested on their behalf. Indirect Investors should note that:

**Minimum Initial Investment and Additional Investment:** The minimum initial investment and additional investment amounts for investments for the Fund do not apply to an Indirect Investor. Any minimum initial investment and additional investment amounts for an IDPS Service are documented in the relevant IDPS Guide.

**Application and Application Forms:** Indirect Investors should not complete this Application Form accompanying the PDS but should rather complete the application form supplied by the IDPS Operator.

**Information:** Indirect Investors will not receive statements, tax information or other information directly from the Fund. Indirect Investors should receive equivalent

information from the IDPS Operator.

**Meetings of Unit holders:** Indirect Investors will not be able to attend or vote at meetings of Unit holders.

**Fees and Expenses of the Fund:** Fees and expenses applicable to the IDPS Service (as set out in the IDPS Guide) are payable in addition to the fees and expenses stated in the PDS.

If you invest through an IDPS Service you may rely on the information in the PDS for the purpose of giving a direction to your IDPS Operator to invest in the Fund on your behalf. The PDS may be withdrawn upon notice by us to the IDPS Operator. If such notice is given by us, it is the responsibility of the IDPS Operator to withdraw the PDS from circulation. We will also advise the IDPS Operator of any replacement of the PDS. It is also the obligation of your IDPS Operator to notify you of any change to or the replacement of the PDS.

We accept no responsibility for any failure of your IDPS Operator to provide you with a current version of the PDS. We authorise the use of the PDS as disclosure to you as a prospective investor in the Fund through the relevant IDPS Service.

If you are investing through an IDPS Service you should, before making any investment decision, read the PDS in conjunction with the relevant IDPS Guide and seek independent financial advice if required.

Investors investing through an IDPS Service should seek appropriate tax advice with regard to the Fund.

## **The Anti-Money Laundering and Counter-Terrorism Financing Act 2006**

The *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (“AML/CTF Act”) and any amendments thereafter, impose a number of obligations on responsible entities when they provide designated services to their investors. Among other things, FTIAust is required to identify and verify the identity of their investors before providing a designated service. The AML/CTF Act and other laws relating to money laundering and the financing of terrorism are referred to in this Application Form as the AML laws.

In order for us to comply with the requirements of the AML laws relating to the avoidance of money laundering, investors must provide us with identification information and/or documents as specified in the PDS as well as this Application Form and any other information or evidence we may request from time to time, for the purpose of AML compliance.

By completing this Application Form, investors agree that:

- they do not subscribe for Units under an assumed name;
- any money used by them to invest in Units is not derived from or related to any criminal activities, including money laundering;
- any proceeds of their investment will not be used in relation to any criminal activities, including the financing of terrorism; and

- if we ask, each investor will provide us with additional information or evidence that we reasonably require for the purposes of the AML laws (including, but not limited to, information or evidence about a Unit holder, any beneficial interest in the Units or the source of funds used to invest).

We may obtain information or evidence about each investor or any beneficial owner of a Unit from yourself or third parties if we believe this is necessary to comply with the AML laws, and in order to comply with the AML laws we may be required to take action, including:

- delaying or refusing the processing of any application or withdrawal; or
- disclosing information that we hold about a specific investor (or investors) or any beneficial owner of the Units to our related bodies corporate or service providers or the AML regulator – AUSTRAC, or as required under the *Autonomous Sanctions Act 2011*. We may also disclose your personal information to law enforcement agencies, or as required under any other laws (whether in or outside of Australia).

If investors have any questions about the AML/CTF Act or any other law, please refer to the AUSTRAC website: [www.austrac.gov.au](http://www.austrac.gov.au).

## **Certification of identification documents**

The identification documents submitted together with this Application Form must be certified as a true copy. Please refer to Section 8 to see who can certify your documents.

Documents in a language other than English must be accompanied by an English translation prepared by an accredited translator.

## **Privacy and Information**

When you complete this Application Form you will be providing us with your personal information. We collect this personal information from you for the primary purpose of providing you with a range of financial products and services and to be able to perform the functions and activities associated with these products and services, including administering your account and communicating with you or others nominated by you. We may also use the personal information to make you aware of our products and services or promotions of these products and services from time to time. We also collect the information to ensure that we comply with relevant Australian and overseas legislation such as taxation laws, the Corporations Act and AML laws.

You are not obliged to provide any of the personal information we request. However, if you do not provide this personal information, we may not be able to process an application from you or administer your account.

We may need to disclose your personal information to another person or organisation. Examples of such information disclosure may include, but is not limited to:

- Administrators who provide fund accounting, unit registry, custodial and other services;
- Auditors, legal advisers, consultants or other professional advisers;
- Agents acting on your behalf, including financial and legal advisers;
- Printers and mailing houses for the purposes of preparation and distribution of mail; and

- Regulatory bodies, government agencies, law enforcement bodies and tax authorities in Australia and overseas.

Our Privacy Policy is available at [www.franklintempleton.com.au](http://www.franklintempleton.com.au) and provides you with various information including about how you may:

- Access your personal information held by us and change that information;
- Complain about a breach of the *Privacy Act 1988* (Cth) (and any amendments thereto) and how we will deal with such a complaint.

We may disclose your personal information to a member of the Franklin Templeton Group located overseas. Please see our Privacy Policy for a list of the countries we may send your personal information to. By signing this application form, you consent to any such disclosure.

### **Selling restriction to US Persons and Canadian residents**

The Funds are not registered in the United States of America under the *Investment Company Act of 1940*. The Units have not been registered in the United States of America under the Securities Act of 1933. The Units made available under this offer may not be directly or indirectly offered or sold in the United States of America or any of its territories or possessions or areas subject to its jurisdiction or to or for the benefit of nationals or residents thereof, unless pursuant to an exemption from registration requirements available under US law, any applicable statute, rule or interpretation. US Persons are not eligible to invest in the Funds. Prospective Investors shall be required to declare that they are not a US Person and are not applying for Units on behalf of any US Person. In the absence of written notice to us to the contrary, if a prospective investor provides a non-US address on the Application Form for investment in the Funds, this will be deemed to be a representation and warranty from such investor that he/she/it is not a US Person and that such investor will continue to be a non-US Person unless and until we are otherwise notified of a change in the investor's US Person status.

The term "US Person", in this Application Form, shall mean, any person that is a United States person within the meaning of Regulation S under the United States Securities Act of 1933 or as defined by the US Commodity Futures Trading Commission for this purpose, as the definition of such term may be changed from time to time by legislation, rules, regulations or judicial or administrative agency interpretations.

Investors are expected to declare whether they are a US Person. If the tax residence section is not completed, your application may be delayed while we seek information from you or we may not be able to process your application.

The Funds are not registered in any provincial or territorial jurisdiction in Canada and Units have not been qualified for sale in any Canadian jurisdiction under applicable securities laws. The Units made available under this offer may not be directly or indirectly offered or sold in any provincial or territorial jurisdiction in Canada or to or for the benefit of residents thereof. Prospective investors may be required to declare that they are not a Canadian resident and are not applying for Units on behalf of any Canadian residents. If an Investor becomes a Canadian resident after purchasing Units, the Investor will not be able to purchase any additional Units.

We may restrict or prevent the ownership of Units by any US person and/or any person, firm or corporate body if in

our opinion such holding may be detrimental to the Fund or its Unit holders, may result in a breach of any applicable law or regulations (whether Australia or foreign) or may expose the Fund or its Unit holders to liabilities (to include, inter alia, regulatory or tax liabilities and any other tax liabilities that might derive, inter alia, from any breach of FATCA (as defined in the section titled 'FATCA and CRS') requirements) or any other disadvantages that the Fund or its Unit holders would not have otherwise incurred or been exposed to. Such persons, firms or corporate bodies (including US persons and/or persons in breach of FATCA requirements) are herein referred to as "Prohibited Persons".

For such purposes, we may:

- decline to issue any Unit and decline to register any transfer of a Unit, where it appears to us that such registration or transfer would or might result in beneficial ownership of such Unit by a Prohibited Person;
- at any time require any person whose name is entered in, or any person seeking to register the transfer of Units on, the register of Unit holders to furnish us with any representations and warranties or any information, supported by affidavit, which we may consider necessary for the purpose of determining whether or not, to what extent and under which circumstances, beneficial ownership of such Unit holder's Units rests or will rest in a Prohibited Person, or whether such registration will result in beneficial ownership of such Units by a Prohibited Person; and
- where it appears to us that any Prohibited Person, either alone or in conjunction with any other person, is a beneficial owner of Units or is in breach of its representations and warranties or fails to make such representations and warranties in a timely manner as we may require, may compulsorily redeem from any such Unit holder all or part of the Units held by such Unit holder; and
- decline to accept the vote of any Prohibited Person at any meeting of Unit holders of the Fund.

### **FATCA and CRS**

This Application Form also collects information about your tax status in order to comply with Australian laws to implement Australia's obligations under FATCA and CRS, which are regimes for the exchange of financial account information by Australia with foreign jurisdictions.

The Foreign Account Tax Compliance Act ("FATCA") relates to US taxpayers and the Common Reporting Standard ("CRS") is a broader framework for the exchange of financial account information between jurisdictions relating to all non-Australian taxpayers.

To comply with FATCA and CRS, as a financial institution, we must collect information about your tax status before opening your account and we are required to identify foreign accounts and provide information relating to foreign accounts and foreign controlling persons to the Australian Taxation Office. The Australian Taxation Office may then pass this information on to other revenue authorities under exchange of information agreements that Australia has entered into with other jurisdictions. We cannot provide tax advice about the impact or compliance obligations of FATCA and CRS on you or your business activities.

If you do not provide this information, we will not be able to process your application. We encourage you to seek advice from a tax adviser if you are uncertain about what steps you need to take.

## What investor type are you?

To ensure that we are able to process your application quickly and efficiently, please refer to the table below to see which sections of this Application Form are applicable to you and need to be completed:

| Investor type<br><i>Please tick the box beside the investor type category that is applicable to you.</i> | Description  | The following sections are applicable to you  |
|--|--|---|
| <input type="checkbox"/> Individual and joint investors  | A natural person or persons  | <ul style="list-style-type: none"> <li>Sections 1 and 1 (A)</li> <li>Sections 2 through 12</li> <li>However, Sections 7 and 9 are applicable only if you have a Financial Adviser.</li> <li>Power of Attorney Holder or Acting Authority to complete additional section under Section 1 (A)</li> </ul>  |
| <input type="checkbox"/> Sole trader   | A natural person operating a business under their own name with a registered business name   | <ul style="list-style-type: none"> <li>Sections 1, 1 (A) and 1 (B)</li> <li>Sections 2 through 12</li> <li>However, Sections 7 and 9 are applicable only if you have a Financial Adviser.</li> <li>Power of Attorney Holder or Acting Authority to complete additional section under Section 1 (A)</li> </ul>   |
| <input type="checkbox"/> Company   | A company registered as an Australian public company or an Australian proprietary company, or a foreign company  | <ul style="list-style-type: none"> <li>Sections 1 and 1 (C)</li> <li>Sections 2 through 12</li> <li>However, Sections 7 and 9 are applicable only if you have a Financial Adviser.</li> <li>For proprietary or private companies, each beneficial owner controlling 25% or more of issued capital must complete Section 1 (A)</li> </ul>  |
| <input type="checkbox"/> Trust/<br>Superannuation Fund   | Type of trusts include self-managed superannuation funds (“SMSF”), registered managed investment schemes, unregistered managed investment schemes, government superannuation funds or other trusts (such as family trusts and charitable trusts) | <div style="border-bottom: 1px solid black; padding-bottom: 5px;"> <p>For Trust/Superannuation Fund with Individuals as Trustee</p> <ul style="list-style-type: none"> <li>Sections 1 and 1 (D)</li> <li>Sections 2 through 12</li> <li>However, Sections 7 and 9 are applicable only if you have a Financial Adviser.</li> <li>Each Individual Trustee must complete Section 1 (A)</li> </ul> </div> <div style="padding-top: 5px;"> <p>For Trust/Superannuation Fund with Corporate Trustee</p> <ul style="list-style-type: none"> <li>Sections 1 and 1 (D)</li> <li>Sections 2 through 12</li> <li>However, Sections 7 and 9 are applicable only if you have a Financial Adviser.</li> <li>Corporate Trustees must complete Section 1 (C)</li> <li>Each beneficial owner of the Corporate Trustee controlling 25% or more of issued capital must also complete Section 1 (A)</li> </ul> </div> |
| <input type="checkbox"/> Partnership   | A partnership created under a partnership agreement  | <div style="border-bottom: 1px solid black; padding-bottom: 5px;"> <p>For Partnerships with Individuals as Partners</p> <ul style="list-style-type: none"> <li>Sections 1 and 1 (E)</li> <li>Sections 2 through 12</li> <li>However, Sections 7 and 9 are applicable only if you have a Financial Adviser.</li> <li>Each Individual Partner must complete Section 1 (A)</li> </ul> </div> <div style="padding-top: 5px;"> <p>For Partnerships with Corporate Partners</p> <ul style="list-style-type: none"> <li>Sections 1 and 1 (E)</li> <li>Sections 2 through 12</li> <li>However, Sections 7 and 9 are applicable only if you have a Financial Adviser.</li> <li>Each Corporate Partner must complete Section 1 (C)</li> </ul> </div>  |

| <b>Investor type</b><br><i>Please tick the box beside the investor type category that is applicable to you.</i> | <b>Description</b>   | <b>The following sections are applicable to you</b>   |
|---|--|---|
| <input type="checkbox"/> Association  | <p>Incorporated associations are associations registered under State or Territory based incorporated association statutes. Unincorporated associations are those of persons who are not registered under an incorporated associations statute and thus do not have the legal capacity to enter into agreements.</p> <p>The member(s) of the association seeking to open the account will be deemed to be the legal owner of the account.</p> | <p>Sections 1 and 1 (F)<br/>           Sections 2 through 12<br/>           However, Sections 7 and 9 are applicable only if you have a Financial Adviser.<br/>           Each public officer (if any), chairperson, secretary and treasurer (or equivalent officer) must complete Section 1 (A).</p> |
| <input type="checkbox"/> Registered co-operatives   | <p>An autonomous association of persons united voluntarily to meet common economic, social and cultural needs and aspirations through a jointly-owned and democratically-controlled enterprise registered under a registry system maintained by a State or Territory. This investor type can include agricultural businesses such as a dairy co-operative.</p>   | <p>Sections 1 and 1 (F)<br/>           Sections 2 through 12<br/>           However, Sections 7 and 9 are applicable only if you have a Financial Adviser.<br/>           Each public officer (if any), chairperson, secretary and treasurer (or equivalent officer) must complete Section 1 (A).</p> |
| <input type="checkbox"/> Government body  | <p>The government of a country, an agency or authority of the government of a country, the government of part of a country or an agency or authority of the government of part of a country.</p>   | <p>Sections 1 and 1 (F)<br/>           Sections 2 through 12</p>  |

If you believe the above investor categories do not adequately represent your legal structure or disposition, please contact us on 1800 673 776 or by email at: [ftclientservices@franklintempleton.com](mailto:ftclientservices@franklintempleton.com)

**Section 1****Investor Details****Are you an existing investor?**

- No** Complete all sections of this Application Form as applicable.  
 **Yes** Complete existing account details below; and Sections 3, 4, 11 and 12.

Existing Account Number

Existing Account Name

**Source of Funds**

Under Anti-money Laundering / Counter-Terrorism Financing laws, we are required to identify your source of investable assets. Please identify the major source of funds for your investment by selecting one or more of the following:

- Savings       Employment Income       Property Sale       Proceeds from other asset sale  
 Business Activity       Inheritance/Gift       Financial Investments  
 Other (please provide details)

**1 (A)****Investor Details**

This section applies to:

- Individuals and sole traders – The individual must provide their details (each individual for a joint account).  
Beneficial owners – If the Company is a proprietary or private company or foreign private company, each beneficial owner controlling 25% or more of a company's issued capital must provide their details (a more detailed description of the beneficial owner requirement is contained in Section 1 (C)).  
Individual Trustees – If the investor is a Trust or Superannuation Fund that has Individual Trustees, each Individual Trustee must provide their details. Please use a separate sheet if necessary.  
Individual Partner – If the investor is a Partnership, each Individual Partner must provide their details. Please use a separate sheet if necessary.  
Officeholders of an incorporated or unincorporated associations, and registered co-operatives – If the investor is an incorporated or unincorporated association, or registered co-operative, each public officer (if any), chairperson, secretary and treasurer (or equivalent officer) must provide their details. Please use a separate sheet if necessary.

**Investor 1**Title: Mr  Mrs  Miss  Ms  Other

Given Names (in full)

Surname

Date of Birth (DD/MM/YYYY)

Country of Residence

Country of Birth

Nationality

Place of Birth

Tax regulations require us to collect information about an investor's tax residency.

Is Investor 1 a tax resident of Australia? Yes  No 

If yes, please fill out the details below:

Australian Tax File Number

or

Exemption details (if applicable)

Drivers Licence No.  
or Passport No.

Place of Issue

Expiry Date

Email

Residential Address – Residential address MUST be provided – an alternate postal address can be added in Section 6.

Unit No.  Street Number  Street Name

Suburb  State  Postcode

Country

Work Phone Number Home Phone Number Fax Number Mobile Phone Number

   

**Investor 2**

Title: Mr  Mrs  Miss  Ms  Other

Given Names (in full)

Surname

Date of Birth (DD/MM/YYYY)

Country of Residence

Country of Birth

Nationality

Place of Birth

Tax regulations require us to collect information about an investor’s tax residency.

Is Investor 2 a tax resident of Australia? Yes  No

If yes, please fill out the details below:

Australian Tax File Number

 -    -   

or Exemption details (if applicable)

Drivers Licence No.  
or Passport No.

Place of Issue

Expiry Date

Email

Residential Address – Residential address MUST be provided – an alternate postal address can be added in Section 6.

Unit No.  Street Number  Street Name

Suburb  State  Postcode

Country

Work Phone Number Home Phone Number Fax Number Mobile Phone Number

## POWER OF ATTORNEY HOLDER OR ACTING AUTHORITY

Please complete the additional section below if you are a power of attorney holder or acting authority.

Please enclose a certified copy of the power of attorney and a certified copy of photographic identification that includes your name, address and signature.

Title: Mr  Mrs  Miss  Ms  Other

Given Names (in full)

Surname

Date of Birth (DD/MM/YYYY)

Country of Residence

Country of Birth

Nationality

Place of Birth

Tax regulations require us to collect information about an investor's tax residency.

If you are an Australian resident for tax purposes, please fill out the details below:

Australian Tax File Number

or Exemption details (if applicable)

Please indicate all other countries in which you are resident for tax purposes and the associated Tax Reference Numbers in the table below. If you are a US citizen or resident, please include United States in this table along with your US Tax Identification Number. If you are not certain about your tax residency you should seek the advice of a tax professional.

Tax Residence

|                      |
|----------------------|
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |

Tax Reference Number

|                      |
|----------------------|
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |

Drivers Licence No.  
or Passport No.

Place of Issue

Expiry Date

Email

Residential Address – Please note that PO Box or C/- is not accepted.

Unit No.

Street Number

Street Name

Suburb

State

Postcode

Country

Work Phone Number

Home Phone Number

Fax Number

Mobile Phone Number

Please complete this part also, if Individual is a sole trader

Full Business Name (if any)

ABN

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Email

Principal Place of Business – Please note that PO Box or C/- is not accepted.

Unit No.  Street Number  Street Name

Suburb  State  Postcode

Country

Work Phone Number

Home Phone Number

Fax Number

Mobile Phone Number

This section applies to all companies, including corporate trustees and corporate partners.

- Companies – The Company must provide their details
- Corporate Trustees – If the investor is a Trust or a Superannuation Fund that has Corporate Trustees, each Corporate Trustee must provide their details. Please use a separate sheet if necessary.
- Corporate Partners – If the investor is a Partnership, each Corporate Partner must provide their details. Please use a separate sheet if necessary.

Full name of company as registered with ASIC or overseas regulator

Country of incorporation/Origin

ACN/ABN or ARBN

 -   -    -   

Email

Registered Office Address – Please note that PO Box or C/- is not accepted.

Unit No.  Street Number  Street Name

Suburb  State  Postcode

Country

Principal Place of Business (If this differs from Registered Office Address) – Please note that PO Box or C/- is not accepted.

Unit No.  Street Number  Street Name

Suburb  State  Postcode

Country

Work Phone Number

Home Phone Number

Fax Number

Mobile Phone Number

Is the company Australian for tax purposes?

Yes

No

Australian Tax File Number

   -    -   

Country of tax residency

Exemption details (if applicable)

Related tax number

   -    -

## Type of company

|   | No                       | Yes                      | If "Yes", please complete these details   |
|---|--------------------------|--------------------------|---|
| Are you a foreign company registered in Australia?  | <input type="checkbox"/> | <input type="checkbox"/> | ARBN<br><input type="text"/>  |
| Are you a foreign publicly listed company?  | <input type="checkbox"/> | <input type="checkbox"/> | Name of market/exchange<br><input type="text"/><br>Identification number (if any) and name of foreign regulator<br><input type="text"/> |
| Are you a foreign private company?  | <input type="checkbox"/> | <input type="checkbox"/> | Identification number (if any) and name of foreign regulator<br><input type="text"/>  |
| Are you a company licensed and subject to the regulatory oversight of a Commonwealth, State or Territory statutory regulator in relation to its activities as a company beyond that provided by ASIC as a company registration body (examples include Australian Financial Services Licensees (AFSL); Australian Credit Licensees (ACL); or Registrable Superannuation Entity (RSE) Licensees)? (Regulated Company) | <input type="checkbox"/> | <input type="checkbox"/> | Regulator name<br><input type="text"/><br>Licence details<br><input type="text"/><br>eg AFSL, ACL, RSE                                  |
| Are you an Australian public listed company?  | <input type="checkbox"/> | <input type="checkbox"/> | Name of market/exchange<br><input type="text"/>   |
| Are you a majority-owned subsidiary of an Australian listed company?  | <input type="checkbox"/> | <input type="checkbox"/> | Australian listed parent company name<br><input type="text"/><br>Name of market/exchange of parent company<br><input type="text"/>      |

## Directors' details

To be completed for proprietary or private companies and foreign private companies

How many Directors are there?

Please provide full names of each Director below.

|    | Given Name(s)        | Surname              |
|----|----------------------|----------------------|
| 1. | <input type="text"/> | <input type="text"/> |
| 2. | <input type="text"/> | <input type="text"/> |
| 3. | <input type="text"/> | <input type="text"/> |
| 4. | <input type="text"/> | <input type="text"/> |

Note: If there are more than 4 directors, please tick the box below and attach additional sheets providing the name and surname of each additional director.

Additional director(s) detail sheet attached.

## Beneficial owners' details

To be completed for all companies that are not Australian Public Listed companies, majority owned by an Australian Public Listed company or a Regulated Company.

Are there any individuals who ultimately own 25% or more of the company's issued share capital (through direct or indirect shareholdings)? Yes  No

Provide details of all individuals who are beneficial owners through one or more shareholdings of 25% or more of the company's issued capital. If this does not apply, provide details of any individual who is able (directly or indirectly) to exercise 25% or more of the voting rights. If neither of the above applies, provide details of any individual who holds the position of a senior managing official in the company.

Please complete Section 1 (A) for each beneficial owner.

|    | Given Name(s)        | Surname              |
|----|----------------------|----------------------|
| 1. | <input type="text"/> | <input type="text"/> |
| 2. | <input type="text"/> | <input type="text"/> |

Note: If there are more than 2 beneficial owners, please tick the box below and attach additional sheets with the information requested.

Additional beneficial owner(s) detail sheet attached.

## 1 (D) Trusts/Superannuation Fund

This section applies to all type of trusts including self-managed superannuation funds, registered managed investment schemes, unregistered managed investment schemes, government superannuation funds or other trusts (such as family trusts and charitable trusts). Please use a separate sheet if necessary.

Full Name of Trust

Business name of the Trustee (if applicable)

Country of Establishment

Email

Registered Address – Please note that PO Box or C/- is not accepted.

Unit No.  Street Number  Street Name

Suburb  State  Postcode

Country

Is the trust Australian for tax purposes?

Yes

No

Australian Tax File Number

--

Country of tax residency

Exemption details (if applicable)

Related tax number

--

### Trustees' details

If Individual Trustee(s), please provide the name of the individual trustee(s) and complete Section 1 (A).

If Corporate Trustee, please provide the name of the corporate trustee and complete Section 1 (C).

How many Trustees are there?

Please provide full names of each Trustee below.

|    | Given Name(s)        | Surname              |
|----|----------------------|----------------------|
| 1. | <input type="text"/> | <input type="text"/> |
| 2. | <input type="text"/> | <input type="text"/> |

Note: If there are more than 2 trustees, please tick the box below and attach additional sheets with the information requested in Section 1 (A) or Section 1 (C), as applicable, for each additional trustee.

Additional trustee(s) detail sheet attached.



**Beneficiary's details** – please complete this section if you have ticked “other trust type” in the table above

Do the terms of the trust identify the beneficiaries by reference to a membership of a class?

Yes  No.

If you tick “Yes” to the question above, please describe the class or classes of beneficiaries (e.g. holders of different classes of units, family members or named person):

|  |
|--|
|  |
|  |
|  |
|  |

If you tick “No” to the question above, please provide details of each beneficiary of the trust:

**Beneficiary 1**

Title

Given name(s)

Surname

Date of Birth (DD/MM/YYYY)

Address

|  |
|--|
|  |
|  |

**Beneficiary 2**

Title

Given name(s)

Surname

Date of Birth (DD/MM/YYYY)

Address

|  |
|--|
|  |
|  |

**Beneficiary 3**

Title

Given name(s)

Surname

Date of Birth (DD/MM/YYYY)

Address

|  |
|--|
|  |
|  |

**Beneficiary 4**

Title

Given name(s)

Surname

Date of Birth (DD/MM/YYYY)

Address

|  |
|--|
|  |
|  |

If there are more than 4 beneficiaries, please tick this box and attach additional sheets with the information requested.

This section applies to a partnership created under a partnership agreement.

Full Name of the Partnership

Full Business name of Partnership registered in any State or Territory (if applicable)

Country of Establishment

Date of establishment

ABN

 -    -     -   

Is the partnership Australian for tax purposes?

Yes

No

Australian Tax File Number

   -    -   

Country of tax residency

Exemption details (if applicable)

Related tax number

   -    -   

Email

Registered Office Address – Please note that PO Box or C/- is not accepted.

Unit No.  Street Number  Street Name

Suburb  State  Postcode

Country

### Partners' details

If Individual Partner(s), please provide the name(s) of the individual partner(s) and complete Section 1 (A).

If Corporate Partner(s), please provide the name(s) of the corporate partner(s) and complete Section 1 (C).

How many partners are there?

Please provide full names of each Partner below.

|    | Full Name(s)         | Address              | Share (%)            |
|----|----------------------|----------------------|----------------------|
| 1. | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2. | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Note: If there are more than 2 partners, please tick the box below and attach additional sheets with the information requested in Section 1 (A) or Section 1 (C), as applicable, for each additional partner.

Additional partner(s) detail sheet attached.

This section applies to incorporated and unincorporated associations, registered co-operatives and government bodies.

Entity Name

Country of incorporation/Origin

ABN

  -    -     -   

Email

Registered Office Address – Please note that PO Box or C/- is not accepted.

Unit No.  Street Number  Street Name

Suburb  State  Postcode

Country

Work Phone Number  Fax Number

Is the entity Australian for tax purposes?

Yes  No

Australian Tax File Number  -  -

Country of tax residency

Exemption details (if applicable)

Related tax number  -  -

**Registration details**

For registered co-operatives and incorporated associations:

Registration number

State/territory of registration

**Officeholders' details (also commonly referred to as the Governing Members).**

Each of the public officer (if any), chairperson, secretary and treasurer (or equivalent officer) of incorporated or unincorporated associations and registered co-operatives must provide their details in Section 1 (A) of this Form.

How many public officers are there?

Please provide full name and position of each officeholder below.

|    | Given Name(s)        | Surname              |
|----|----------------------|----------------------|
| 1. | <input type="text"/> | <input type="text"/> |
| 2. | <input type="text"/> | <input type="text"/> |

Note: If there are more than 2 officeholders, please tick the box below and attach additional sheets with the information requested in Section 1 (A) for each additional officeholder.

Additional officeholder(s) detail sheet attached.

**For government bodies**

Is the government body established under Commonwealth or State/Territory legislation? (please select one)

Yes – please specify the legislation:

No – please specify other legislation or method of establishment:

(If you are a foreign government body, we may also ask you additional information about the ownership/control of your body).

Specify the state/territory (of Commonwealth) of establishment:

A minor may be registered as a jointholder but only if the first holder is above the age of 18 years. In such a situation, FTIAust will only act on the instructions given by the first holder singly.

When giving instruction to us about your investment, please indicate who has authority to operate your account;

**Individual/Joint Accounts (*if no box is ticked we will assume both to sign*)**

Either to sign                       Both to sign                       Power of Attorney acting on behalf of the investor

**Company, Trust, Superannuation Fund Accounts, Partnerships (if no box is ticked all instructions must be signed by two Directors/Trustees /Partners/Director and Secretary, or Sole trader)**

One to sign                       Both to sign                       Other (please specify)

**Notes:**

1. Company, trust, superannuation fund and partnership signing by duly authorised signatory(ies) must provide appropriate documentation showing the proper appointment of the signatory(ies) to FTIAust.
2. Applications by associations, registered co-operatives and government bodies must be signed by the authorised office bearers and a copy of the Constitution/Rules provided to FTIAust.

Please tick the box beside the Fund(s) you wish to invest in.

| Tick Box                 | Fund Name   | APIR Code     | Investment Amount<br>(Minimum investment \$25,000 per Fund and minimum subsequent investment is \$5,000 per Fund. Minimum holding balance is \$10,000)* | Distribution Options                    |  |
|--------------------------|---|---------------|---|---|--|
|                          |   |               |   | Reinvest as Additional Units – tick box | Deposit in nominated bank account – tick box |
| <input type="checkbox"/> | Franklin Templeton Australian Equity Fund – W Class Units     | FRT0020AU     | \$  | <input type="checkbox"/>                | <input type="checkbox"/>                     |
| <input type="checkbox"/> | Franklin Global Growth Fund – W Class Units                   | FRT0009AU     | \$  | <input type="checkbox"/>                | <input type="checkbox"/>                     |
| <input type="checkbox"/> | Templeton Global Equity Fund                                  | FRT0004AU     | \$  | <input type="checkbox"/>                | <input type="checkbox"/>                     |
| <input type="checkbox"/> | Franklin Templeton Multisector Bond Fund – W Class Units      | FRT0011AU     | \$  | <input type="checkbox"/>                | <input type="checkbox"/>                     |
| <input type="checkbox"/> | Templeton Global Bond Plus Fund – W Class Units               | FRT0008AU     | \$  | <input type="checkbox"/>                | <input type="checkbox"/>                     |
| <input type="checkbox"/> | Franklin Templeton Global Aggregate Bond Fund – W Class Units | FRT0025AU     | \$  | <input type="checkbox"/>                | <input type="checkbox"/>                     |
| <input type="checkbox"/> | Franklin Australian Absolute Return Bond Fund – W Class Units | FRT0027AU     | \$  | <input type="checkbox"/>                | <input type="checkbox"/>                     |
| <input type="checkbox"/> | Franklin Diversified Fixed Income Fund – W Class Units        | FRT4234AU     | \$  | <input type="checkbox"/>                | <input type="checkbox"/>                     |
|                          |   | <b>TOTAL:</b> | \$  |   |  |

\* Notwithstanding the above, we may accept a lesser amount, subject to compliance with the Corporations Act.

Please indicate how you wish to receive any distributions made by the fund(s). If no box is ticked, all distributions will be reinvested into additional units in the fund.

If you have elected for the distribution to be deposited into your bank account, please provide your bank account details below.

Name of Australian Bank, Building Society or Credit Union

Branch

Branch Number (BSB)

-

Account Number

Account Name as registered with your Bank

**Please note:** If your account number does not have 9 digits please do not add zeros at the beginning or end of your account number unnecessarily as it may result in an incorrect payment.

### Redemption Payment Instructions

Please provide the details of the bank account where you wish to receive your redemption payments, if different from the account noted above for distribution payments.

Name of Australian Bank, Building Society or Credit Union

Branch

Branch Number (BSB)

-

Account Number

Account Name as registered with your Bank

**Please note:** If your account number does not have 9 digits please do not add zeros at the beginning or end of your account number unnecessarily as it may result in an incorrect payment.

Please note FTIAust does not make Third Party Payments.

Please select the payment method for your application

Electronic Funds Transfer (“EFT”)

Payable to

Beneficiary Account Name Franklin Templeton Investments Australia Limited Applications Account

BSB 212-200

Beneficiary Account Number 010124541

Reference Include account name. Please also include your account number if you hold an existing account with FTIAust

Please enclose a copy of the payment advice confirming the funds transfer together with this Application Form.

Real Time Gross Settlement (“RTGS”)

Payable to

Currency AUD

Country Australia

Beneficiary Bank JP Morgan Chase Bank, Sydney Branch BSB 212-200

Swift BIC CHASAU2X

Beneficiary Account Name Franklin Templeton Investments Australia Limited Applications Account

Beneficiary Account Number 010124541

Reference Include account name. Please also include your account number if you hold an existing account with FTIAust

Please enclose a copy of the payment advice confirming the funds transfer together with this Application Form.

For EFT and RTGS payments, please provide the bank account details from which your application payment is made:

Name of Australian Bank, Building Society or  
Credit Union

Branch

Branch Number (BSB)

   -   

Account Number

         

Account Name as registered with your Bank

Cheque

Please make cheque payable to “**Franklin Templeton Investments Australia Limited Applications Account**” and send with this Application Form. All cheques should be crossed “Not Negotiable”.

For cheques, please provide the following information:

Cheque Number

Issuing Bank

### Secure Website Access

Access to Franklin Templeton's secure website enables you and/or your adviser to view your account details online, including your current valuation and transaction history as well as giving you access to your statements. Please note you will need to provide your email address in the contact details in Section 1 in order to register for access. Joint investors/trustees are required to register separately. Once your application has been processed and your account is set up, you will receive the necessary login details.

### Communication

All communications will be sent via email unless you request otherwise. Alternatively, you may elect to receive all communications from us by post by indicating your preference below:

I/we wish to receive correspondence by post.

### Annual Report Election

You can obtain a copy of the Funds' most recent annual report from our website at [www.franklintempleton.com.au](http://www.franklintempleton.com.au)

If you would like us to send you a copy of the annual reports for the Fund(s), please indicate your preference below:

I/we wish to receive the annual report by email.

I/we wish to receive the annual report by post.

Please complete the following only if you wish to provide alternate contact details for receipt of correspondences. If you leave this section blank, we will use the contact details provided in Section 1.

**Joint investors** – please note that unless you indicate otherwise in this section, FTIAust will use the contact details provided in Section 1 (A) for Investor 1 for all correspondence.

**Please note:** We will not accept your Financial Adviser's address.

Email

or

Account Designation (optional)

Postal Address

Care of (c/-) Property name/Building Name (if applicable)

Unit No.

Street Number

Street Name

Suburb

State

Postcode

Country

If you have a Financial Adviser, please give your consent, by ticking the appropriate box below, for FTIAust to provide them with access to information about your investments and to authorise them to make enquiries on your behalf.

I authorise my Financial Adviser to receive information about my investments. By entering my Financial Adviser details below I acknowledge and agree they will have online access to information about my investment and may receive copies of my statements including by email or post.

Name of Financial Adviser

Adviser Number (if applicable)

AFSL Number (mandatory)

Company or Organisation Name

Dealer Group

PO Box/RMB/Locked Bag/Care of (c/-) Property name/Building Name (if applicable)

Unit No.

Street Number

Street Name

Suburb

State

Postcode

Country

Work Phone Number

Fax Number

Mobile Phone Number

Email

To enable us to comply with the AML laws and other regulatory requirements you will need to provide us with the identification documents as outlined below.

Please **DO NOT** send original documents. Send only certified copies of original documents as documents will not be returned. Documents cannot be sent to us by fax.

If you are placing your application through a Financial Adviser, we still require copies of your identification documents, however these documents do not need to be certified provided your Financial Adviser has completed the verification in Section 9.

### How to certify your documents

On the first page of the copy of the original document, the acceptable independent certifier must complete in writing the following information:

I (insert name) \_\_\_\_\_ of, (insert address) \_\_\_\_\_ ,  
 (insert occupation) \_\_\_\_\_ , **certify on this** (insert day) \_\_\_ **day of** \_\_\_\_\_ (insert month and year)  
**that this document is a complete and accurate copy of the original document sighted by me.**  
 Signed (insert signature) \_\_\_\_\_ (insert contact number) \_\_\_\_\_

The date on the certification should be no earlier than 12 months from the date it is received by FTIAust.

### Who can certify your documents

A number of persons can certify a document under anti-money laundering and counter-terrorism financing laws, including any of the following persons:

- A legal practitioner who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, or overseas equivalent
- A judge or master of a court, or overseas equivalent
- A magistrate, or overseas equivalent
- A registrar or deputy registrar of a court, or overseas equivalent
- A clerk of a court
- A Justice of the Peace
- A notary public
- A police officer
- A sheriff or sheriff's officer
- A member of an Australian parliament or legislature, or overseas equivalent
- An agent of the Australian Postal Corporation who is in charge of supplying postal services to the public
- An Australian Consular Officer or an Australian Diplomatic Officer (within the meaning of the Consular Fees Act)
- An Australian bank officer, credit union officer or building society officer with two or more continuous years of service
- An Australian finance company officer with two or more continuous years of service
- An officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more continuous years of service with one of more licencees
- An officer with, or authorised representative of, a holder of an Australian credit licence, having two or more continuous years of service with one of more licencees
- A member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accounts or the National Institute of Accountants, or overseas equivalent
- A member of the Association of Taxation and Management Accountants, or overseas equivalent
- A fellow of the National Tax Accountants' Association, or overseas equivalent
- An Australian teacher employed on a full-time basis at a school or tertiary education institution
- Any other person as permitted by the anti-money laundering and counter-terrorism financing laws

## Investor identification documents

### (a) Individuals / Persons

This section is to be completed by individual investors, including both investors if a joint holding, sole traders, individual trustees, individual beneficial owners of a corporate trustee, individual governing members of an association or registered co-operative. Please complete either Option 1 or Option 2 and attach the applicable document(s). Note that, for an applicant that is a natural person, a document produced by you must not have expired (other than in the case of a passport issued by the Commonwealth that expired within the preceding two years). Where an individual only holds expired documents, please contact us to discuss your options.

#### OPTION 1

| Select one               | Primary photographic identity documents   |
|--------------------------|---|
| <input type="checkbox"/> | Driver's licence or permit under a State/Territory government or an equivalent authority of a foreign country |
| <input type="checkbox"/> | Australian passport (that is current or expired within the last two years)                                    |
| <input type="checkbox"/> | Foreign passport or other international travel document that has a photograph and signature of the individual |
| <input type="checkbox"/> | Proof of age card issued by a State/Territory government  |
| <input type="checkbox"/> | National identity card issued by a foreign government that has a photograph and signature of the individual   |

OR

#### OPTION 2

Please attach at least one primary non-photographic document **AND** one secondary non-photographic document.

| Select one               | Primary non-photographic identity documents               |
|--------------------------|---|
| <input type="checkbox"/> | Australian birth certificate or birth extract             |
| <input type="checkbox"/> | Australian citizenship certificate                        |
| <input type="checkbox"/> | Foreign citizenship certificate                           |
| <input type="checkbox"/> | Foreign birth certificate                                 |
| <input type="checkbox"/> | A Centrelink Pension card or a Centrelink Healthcare card |

AND

| Select one               | Secondary non-photographic identity documents  |
|--------------------------|--|
| <input type="checkbox"/> | A financial benefit notice issued by the Commonwealth, State or Territory within the last 12 months that contains the name and address of the individual (please ensure that you obscure your TFN, income and tax information) |
| <input type="checkbox"/> | An income tax assessment notice issued within the last 12 months that contains the name and address of the individual (please ensure that you obscure your TFN, income and tax information)                                    |
| <input type="checkbox"/> | A local government notice (e.g. council rates) or utilities notice (e.g. electricity, gas or phone bill) issued within the last 3 months   |

### (b) Company and corporate trustees

If a company or corporate trustee please attach at least one identification document which verifies the identity of the company.

| Select one               | Identity documents   |
|--------------------------|--|
| <input type="checkbox"/> | A certificate of registration issued by ASIC or other regulator      |
| <input type="checkbox"/> | A licence or other records issued by a domestic or foreign regulator |
| <input type="checkbox"/> | Other (please specify): <input type="text"/>                         |

**(c) Trust or partnership**

If an individual trustee please attach documentation as listed in section (a) above and for a corporate trustee as listed in section (b) above, please attach at least one identification document which verifies the identity of the trust.

| Select one               | Individual or corporate identity documents  |
|--------------------------|---|
| <input type="checkbox"/> | Individual trustee or partner – Attach documentation as listed in section (a) above |
| <input type="checkbox"/> | Corporate trustee – Attach documentation as listed in section (b) above             |

| Select one               | Trustee/trust or partner/partnership identity documents  |
|--------------------------|--|
| <input type="checkbox"/> | A certified copy of the trust deed or a certified copy of an extract or extracts from the trust deed that identifies the name of the trust, the name(s) of the trustee(s), the place of establishment of the trust and the identity of the beneficiaries   |
| <input type="checkbox"/> | A certified copy or certified extract of a current partnership agreement or minutes of a partnership meeting. Either copy must include the full name of the partnership; the registered business name; the country in which the partnership was established; and the full name and residential address of each partner |
| <input type="checkbox"/> | A certificate issued to the trust by ASIC or other regulator   |
| <input type="checkbox"/> | Other (please specify): <input type="text"/>   |

**(d) Associations and registered co-operatives**

Please attach at least one identification document which verifies the association or co-operative. If you are an unincorporated association, please attach documentation listed in section (a) above for all the individual governing members.

| Select one               | Association and registered co-operatives identity documents                         |
|--------------------------|---|
| <input type="checkbox"/> | A certified copy of the constitution or rules of the association or co-operative    |
| <input type="checkbox"/> | A certificate issued to the association or co-operatives by ASIC or other regulator |
| <input type="checkbox"/> | A certified copy of the minutes of an association or co-operative meeting           |
| <input type="checkbox"/> | Other (please specify): <input type="text"/>  |

| Select one               | Individual governing members identity documents   |
|--------------------------|---|
| <input type="checkbox"/> | If you are an unincorporated association please attach documentation listed in section (a) above for all the individual governing members |

**(e) Government body**

Please attach at least one identification document which verifies the identity of the government body.

| Select one               | Government body identity documents                         |
|--------------------------|--|
| <input type="checkbox"/> | A certified copy of the constitution of the governing body |
| <input type="checkbox"/> | A certificate issued to the government body by a regulator |
| <input type="checkbox"/> | Other (please specify): <input type="text"/>               |

**(f) Power of Attorney**

Please complete this section if one or more attorneys are completing and signing this form under power of attorney and attach the applicable documents.

| Select one               | Proof of identity and attorney's authority to act   |
|--------------------------|---|
| <input type="checkbox"/> | A certified copy of the Power of Attorney's driver's licence, passport or other photographic identification which confirms the full name and the residential address and contains your signature.   |
| <input type="checkbox"/> | Certified copy of Power of Attorney which confirms that any attorney completing and signing this form is authorised to do so under the power of attorney. If the power of attorney does not contain a sample of each attorney's signature, please also provide a list containing the name of each attorney and a sample of each attorney's signature. |

**Documents in a language other than English must be accompanied by an English translation prepared by an accredited translator.**

This section is to be completed by your Financial Adviser and submitted along with the required attachments.

APPLICANT NAME(S):

I confirm that I have completed an appropriate customer identification procedure (CID) on the above mentioned investor(s) which meets the requirements of the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act).

I further agree that I will:

- provide FTIAust with copies of the relevant customer identification documentation;
- retain the applicant's identification records for a period of seven years after the relationship with the applicant has ended;
- use reasonable efforts to obtain additional information from the applicant as FTIAust may request;
- not knowingly do anything to put FTIAust in breach of the AML laws; and
- notify FTIAust immediately if I become aware of anything that would put FTIAust in breach of the AML laws, Autonomous Sanctions Laws or any other laws.

Dated

Signature of Financial Adviser

Name of Financial Adviser

AFSL Number

Note:

\* Please refer to Section 8 for list of acceptable identification documents

FATCA/CRS information – Who should complete this section?

This section should be completed by the person completing the application form who is **authorised to provide tax residency and certification information** for:

- all other applicants, and
- the underlying entity eg trust or partnership etc, and
- the beneficial owners and controlling persons.

For more information go to [www.linkmarketservices.com.au/corporate/FATCA](http://www.linkmarketservices.com.au/corporate/FATCA) and click on the links provided.

Tick this box if you confirmed you are an existing investor in Section 1, and have certified your tax residency status for both FATCA and CRS since 1 July 2017. Your FATCA/CRS certification is complete and no further information is required.

Personal information collected for the purposes of the Foreign Account Tax Compliance Act (FATCA) and the OECD Common Reporting Standard (CRS) will be:

- Used for the purpose of meeting Our obligations under CRS and the Intergovernmental Agreement (IGA) between Australia and the U.S. implementing the U.S. legislation known as FATCA; and
- Used for other purposes relating to my holding such as to verify my identity and to review and correct discrepancies in the information recorded about me and my holdings.

### FATCA/CRS certification of individual, joint individual, sole trader or deceased estate

If you are an **individual, joint individual, a sole trader**, or you will hold the account on behalf of another individual or a deceased estate, then please select the best option below and answer the associated questions. If your account is held on behalf of an entity, eg a company, trust, partnership etc, please go to the section on the next page 'FATCA and CRS certification of an entity.' If you do not provide this information, we will not be able to accept your application.

Is the following statement correct? (Tick if applicable)

Your account is held by an individual or an entity acting in the capacity of executor or administrator of a deceased estate, where

EITHER certified copies of the death certificate or Grant of Probate/Letters of Administration have already been provided to us,

OR certified copies of these documents are attached to this application.

If you selected the above, your FATCA/CRS certification is complete and no further information is required.

**Is/are all of the Individual applicants (including the person/s for whom the account will be held e.g. a children's account) a citizen or a resident for tax purposes in a country other than Australia?**

Yes – please provide the Foreign Individual Investors and Individual Beneficial Owner details below. Note: If an individual is both an Australian and a foreign tax resident, or a tax resident of more than one foreign country, you must also provide this information.

No – your FATCA/CRS certification is complete and no further information is required.

Only some of the individuals are Australian tax residents:

- For those Individuals who are Australian tax residents only (including the person/s for whom the account is held), please provide their full names in the Australian tax resident information below.
- For the remaining individuals (ie who are NOT solely Australian tax residents), please provide the Foreign Individual Investors and Individual Beneficial Owner details below.

**Australian tax resident information**

Name of Australian tax resident 1

Name of Australian tax resident 2

Name of Australian tax resident 3

**Foreign Individual Investor(s) and Individual Beneficial Owner(s) details**

Please provide ALL information, including your foreign TIN (Taxpayer Identification Number), or exclusions, as relevant.

Full name of individual 1

Date of birth

Street address (PO Box is NOT acceptable)

Country 1 of tax residency

Country 2 of tax residency

Country 3 of tax residency

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

TIN 1

OR Country does not require the TIN to be disclosed

OR Country does not issue TINs

TIN is available but, has not obtained or has not been issued a TIN

TIN 2

OR Country does not require the TIN to be disclosed

OR Country does not issue TINs

TIN is available but, has not obtained or has not been issued a TIN

TIN 3

OR Country does not require the TIN to be disclosed

OR Country does not issue TINs

TIN is available but, has not obtained or has not been issued a TIN

Full name of individual 2

Date of birth

Street address (PO Box is NOT acceptable)

Country 1 of tax residency

Country 2 of tax residency

Country 3 of tax residency

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

TIN 1

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

TIN 2

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

TIN 3

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

### FATCA and CRS certification of an entity

If you are an investor that is one of the following:

- **A company or other incorporated body, or**
- **Another type of entity e.g. a trust, partnership, cooperative or association etc., or**
- **An individual/s that will hold the Account on behalf of another entity that is a superannuation fund, trust, partnership, government body, co-operative, association or other type of entity,**

then please answer the questions below. If you do not provide this information, we will not be able to accept your application.

**Is the account holder Australian registered for tax purposes?**

- Yes  No

If you answered **No**, please go to the next question.

If you answered Yes, please provide your ACN, ABN, ARBN or ARSN

**Is this account holder a US citizen or a resident for tax purposes in a country other than Australia?**

- Yes  No

If yes, please provide ALL information, including your foreign TIN (Taxpayer Identification Number), or exclusions, as relevant.

Country of tax residency 1

Address

|                      |                      |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|

TIN 1

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

Country of tax residency 2

Address

|                      |                      |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|

TIN 2

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

Country of tax residency 3

Address

|                      |                      |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|

TIN 3

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

**The following best describes your organization** (tick one)

- An Australian regulated superannuation fund** (including a complying SMSF), retirement or pension fund.

Please provide the fund's ABN to complete your certification.

If you selected this option, your certification is complete and no further information is required.

- An account held by an entity acting in the capacity of executor or administrator of a deceased estate**, where EITHER a certified copy of the death certificate or Grant of Probate/Letters of Administration have already been provided to us, OR certified copies of these documents are attached to this application.

If you selected this option, your certification is complete and no further information is required.

- Public Listed Company, or a Majority Owned Subsidiary of a Public Listed company**, (includes public listed companies or majority owned subsidiaries of listed companies that are not Financial Institutions)

Please provide the name of the market or stock exchange where your company is listed.

Please provide your company's unique exchange code here, e.g. ASX code, ticker code.

If you selected this option, your certification is complete and no further information is required.

- Not a Financial Account.** Certain accounts are NOT considered to be 'Financial Accounts' for the purposes of CRS and FATCA. These include:

- An Employee Share Scheme or Trust as defined in the Income Tax Assessment Act 1997
- An Escrow Account established in connection with a court order or judgment, or a sale, exchange, or lease of real or personal property where certain requirements have been met.

If you selected this option, your certification is complete and no further information is required.

**Exempt Beneficial Owner.** Under CRS and FATCA, an Exempt Beneficial Owner includes, but is not limited to:

- Australian government organisation or agency
- Reserve Bank of Australia
- International (including intergovernmental) organization

If you selected this option, your certification is complete and no further information is required.

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**Financial institution.** Includes:

- Depository institution
- Investment entity
- Specified insurance company
- Custodian institution.

What is your GIIN?

If you do not have a GIIN, what is your financial institution status? (Tick one):

Deemed Compliant FFI (foreign financial institution)

Excepted FFI

Non-participating FFI Other (please specify)

Non-Reporting IGA Financial Institution

Other (please specify)

**Are you an Investment Entity (financial institution) located in a non-CRS participating jurisdiction and professionally managed by another financial institution?**

Yes  No

For a list of CRS Participating Jurisdictions, please refer to the ATO website:

[https://www.ato.gov.au/General/International-tax-agreements/In-detail/International-arrangements/Automatic-exchange-of-information---guidance-material/?page=2#4\\_19\\_CRS\\_Participating\\_Jurisdictions](https://www.ato.gov.au/General/International-tax-agreements/In-detail/International-arrangements/Automatic-exchange-of-information---guidance-material/?page=2#4_19_CRS_Participating_Jurisdictions).

If you answered YES, please provide the **Beneficial Owners or \*\*Controlling Persons** information (on the next page).

**Is the registered holder of this account also a financial institution?**

Yes  No

If you answered Yes, please provide the GIIN (below) for the registered holder.

**What is the registered holder's GIIN?**

**If holder does not have a GIIN, what is its financial institution status (tick one):**

Deemed Compliant FFI

Excepted FFI

Non-participating FFI

Other (please specify)

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**Non-Financial Entity (NFE) or (NFFE).** This includes the following entity types:

- Private or proprietary company that is NOT a financial institution
- Public unlisted company that is NOT a financial institution
- Partnership
- Trust
- Co-operative
- Association or club
- Registered or non-registered charitable organization
- Other type of entity

If you selected this option, please complete the section on NFE/NFFE entities below.

## NFE/NFFE entities

An entity is Active if it derives more than 50% of its income from the sale of goods or services AND it uses more than 50% of its assets to generate income from the sale of goods or services. An NFE is Passive if it does not fit the description of an Active entity, OR is a professionally-managed investment entity located in a non-participating CRS (Common Reporting Standard) jurisdiction.

### Is the NFE/NFFE Active or Passive?

Active  Passive

If the NFE/NFFE is Passive, are any of the entity's Beneficial Owners or Controlling Persons tax residents of countries other than Australia?

Yes  No

If Yes, please provide the details of these individuals below.

**Entity foreign beneficial owner(s) or \*\*Controlling Persons details** (NB only foreign, Passive NFEs/NFFEs need to complete this)

Please provide ALL information, including your foreign TIN (Taxpayer Identification Number) or exclusions, as relevant.

Full name of individual 1

Date of birth

Street address (PO Box is NOT acceptable)

Country 1 of tax residency

Country 2 of tax residency

Country 3 of tax residency

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

TIN 1

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

TIN 2

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

TIN 3

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

Full name of individual 2

Date of birth

Street address (PO Box is NOT acceptable)

Country 1 of tax residency

Country 2 of tax residency

Country 3 of tax residency

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TIN 1

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

TIN 2

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

TIN 3

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

Full name of individual 3

Date of birth

Street address (PO Box is NOT acceptable)

Country 1 of tax residency

Country 2 of tax residency

Country 3 of tax residency

|  |  |  |
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TIN 1

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

TIN 2

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

TIN 3

- OR Country does not require the TIN to be disclosed
- OR Country does not issue TINs
- TIN is available but, has not obtained or has not been issued a TIN

\*Capitalised terms used in this section have the meanings defined in the intergovernmental agreement between the Australian and governments to improve international tax compliance and to implement FATCA dated 28 April 2014.

\*\* A Controlling Person means any individual who ultimately beneficially owns 25% or more of an entity or controls the entity, including control through a chain of ownership or by means of control other than direct control.

**You should read the current PDS in full before making these declarations and signing the execution page at the end of this Application Form**

By completing the Application Form you:

- (a) declare that you have read and understood the PDS and agree to the terms contained in it and to be bound by the provisions of the current PDS and the Constitution (each as amended from time to time);
- (b) acknowledge that an investment in the Fund is subject to investment risk, including possible delays in repayment and loss of income and principal invested and that none of FTIAust, any other member of the Franklin Templeton Investments group, Link Market Services Limited (the “**Registrar**”), J.P. Morgan Chase Bank, N.A. or any member of the J.P. Morgan Chase Bank, N.A. group, guarantees the performance of the Fund, the repayment of capital or any particular rate of distribution. You also acknowledge that an investment in the Fund is not a deposit or other liability of FTIAust, any other member of the Franklin Templeton Investments group, Link Market Services Limited, J.P. Morgan Chase Bank, N.A. or any member of the J.P. Morgan Chase Bank, N.A. group;
- (c) agree to the collection, use and disclosure of your personal information in accordance with FTIAust’s privacy policy;
- (d) declare that you have received the PDS personally, or a printout of it, accompanied by or attached to this Application Form before making an application for Units;
- (e) declare that all information provided in the Application Form or any other information provided in support of the application is true and correct;
- (f) declare if you have received the PDS from the internet or another electronic means, that it was received either personally or a printout accompanied this Application Form before making an application for Units;
- (g) declare that you have the legal power to invest in accordance with this application;
- (h) declare that you have received and accepted this offer in Australia;
- (i) declare that if the Application Form is signed under power of attorney, you have no knowledge of the revocation of that power of attorney (a certified copy of the power of attorney should be submitted with this Application Form unless we have already sighted it);
- (j) declare that sole signatories signing on behalf of a company are signing as sole director or as a sole director/secretary of the company;
- (k) acknowledge that the PDS does not constitute an offer in any jurisdiction in which, or to any person to whom, it would be unlawful to make the offer;
- (l) declare that if investing as a Trustee on behalf of a Superannuation Fund or Trust you are acting in accordance with your designated powers and authority under the Trust Deed. In the case of Superannuation Funds, you also confirm that the fund is a complying fund under the *Superannuation Industry (Supervision) Act 1993* (Cth);
- (m) acknowledge that all information relating to this Application Form for investment or any subsequent information relating to this investment may be disclosed to any service provider and where you have provided your consent in Section 9, to your Adviser. This authority will continue unless revoked in writing by you;
- (n) agree to provide any additional information and to provide reasonable assistance to FTIAust that FTIAust may request from time to time;
- (o) understand that if you fail to provide any information requested in this Application Form or do not agree to any possible disclosures or uses of your information as described above, your application may not be accepted by FTIAust;
- (p) consent to telephone conversations being recorded;

- (q) are not a US Person and are not applying for Units on behalf of any US Person. Notwithstanding the foregoing, if my/our account becomes a US Account as determined by FTIAust, acting reasonably, for the purpose of FATCA, Regulation S under the United States Securities Act of 1933 or as defined by the U.S. Commodity Futures Trading Commission, I/we will provide FTIAust with any information reasonably requested by FTIAust;
- (r) are not a Canadian resident and are not applying for Units on behalf of any Canadian residents; and
- (s) undertake to advise FTIAust within 30 days of any change in circumstances which affects the tax status or residency declared in this Application Form; and
- (t) declare that the representations and acknowledgements made by you in this Application Form are continuing and shall remain true, complete and in full effect for so long as you are a Unit holder in the Fund.

**If you use the facsimile or email facility you:**

- (a) release, discharge and agree to indemnify FTIAust, its affiliates and their agents, including the Registrar and their respective officers from and against all losses, liabilities, actions, proceedings, accounts, claims and demands arising from instructions received under the facility;
- (b) agree that a payment made in accordance with the conditions of the facility shall be in complete satisfaction of all obligations to you for a payment, notwithstanding that it may have been requested, made or received without your knowledge or authority;
- (c) irrevocably appoint for valuable consideration FTIAust, its related bodies corporate and each of their respective employees whose title includes the word “director” jointly, and each of them severally as my/our true and lawful agent to do:
  - (i) everything necessary or expedient to bind you to the terms and conditions of investing in the Fund(s) as set out in the PDS (“**Terms**”), complete any blanks in the Terms and date and execute the Terms on your behalf;
  - (ii) anything which you must do under or in relation to the Terms or any other agreement or arrangement between you and FTIAust relating to the Units (including arranging physical delivery of the Delivery Assets or acting in accordance with the Agency Sale Service);
  - (iii) anything incidental or necessary in relation to the above (including, but not limited to, completing any blanks in this Application Form and appointing any person as sub-agent to do any of the above); and
  - (iv) indemnify the agent and its employees and directors (contemplated above) against all claims, losses, damages and expenses suffered or incurred as a result of anything done in accordance with the above agency appointment.

**AML/CTF Act and Rules**

FTIAust aims to prevent, detect and not knowingly facilitate money laundering and terrorism financing. FTIAust does this to comply with the *Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) Act 2006*. To meet its regulatory and compliance obligations under the AML/CTF Act, its contractual obligations and its internal due diligence requirements, FTIAust will be implementing a number of measures and controls including carefully identifying, verifying and monitoring its investors and, where required by law, reporting any suspicious matters to the regulator, AUSTRAC, or any other regulator or law enforcement agency as required by the *Autonomous Sanctions Act 2011*.

**We ask you to note:**

- (a) our right to collect identification and to verify documents under the AML/CTF legislative regime;
- (b) our right not to provide a designated service to you in certain circumstances;
- (c) that transactions may be delayed, blocked, frozen or refused where reasonable grounds are established that the transaction breaches Australian law or sanctions, or the law or sanctions of any other country;

- (d) that where transactions are delayed, blocked, frozen or refused, we are not liable for any loss you suffer (including consequential loss) as a result of our compliance with the AML/CTF Act or the *Autonomous Sanctions Act 2011* as it applies to the Units;
- (e) from time to time during the term of your investment, you may be required to provide additional information to assist us in the above processes;
- (f) we have reporting obligations under the *AML/CTF Act 2006* and the *Autonomous Sanctions Act 2011* and must report certain matters to regulators and law enforcement agencies;
- (g) that the tipping off prohibition requirements under the AML/CTF Act will prevent us from informing you that any required reporting has taken place; and
- (h) that we may have other legal obligations to disclose the information gathered about you to regulatory and/or law enforcement agencies, including AUSTRAC and to other bodies, including a related company that forms part of our Designated Business Group (if any), if required by law.

#### Privacy

If you do not provide the personal information we ask you to supply in this Application Form, we may not be able to accept your application. The personal information collected from you will be collected, used and disclosed in accordance with the *Privacy Act 1988* (Cth) and any amendments thereto and FTIAust's privacy policy as amended from time to time which can be accessed from [www.franklintempleton.com.au](http://www.franklintempleton.com.au).

By signing this Application Form, you acknowledge and agree to the collection, use and disclosure of your personal information as set out in FTIAust's Privacy Policy.

Please review FTIAust's Privacy Policy and the section titled "Privacy" in the PDS for further information on the collection, use and disclosure of your personal information by FTIAust.

#### Advisers

Advisers adding their Adviser stamp to this Application Form provide the following acknowledgements and representations:

- (a) I acknowledge that I am either an Australian financial services licensee or a representative of an Australian financial services licensee and that, in relation to this Application Form, I have only provided financial services that are within the scope of the Australian financial services licence applicable to me;
- (b) I acknowledge that I have complied with the relevant disclosure requirements, including all relevant requirements in relation to the disclosure of fees, and any requirement to provide the PDS, Financial Services Guides, Statements of Advice or any other disclosures required by the Corporations Act;
- (c) I represent that in compliance with the provisions of the *AML/CTF Act 2006* and Rules, I have taken the steps required to identify and verify the Applicant's identity (including the directors, beneficial owners and trustees listed in the Application Form) by checking and verifying the identity, nationality, residential address and signature of the Applicant, and any other relevant details, in compliance with the AML/CTF Act and Rules and any Distribution Agreement entered into for purposes of compliance with the AML/CTF Act and Rules;
- (d) I represent that I have taken adequate steps to assist in the prevention of money laundering or terrorism financing activities which steps may include, without limitation, identifying the Applicant's source of wealth and monitoring of any unusual transactions;
- (e) I represent that I have assessed the suitability of this product and other relevant factors for the Applicant and have only recommended or distributed it as I consider it suitable for the Applicant, taking into account the Applicant's investment objectives, financial situation and particular needs;
- (f) I agree to provide FTIAust with the necessary identification records of the Applicant as and when FTIAust requests them;
- (g) I agree to retain the record of the Applicant's identification record or documents for a period of seven years after the relationship with the Applicant has ended;
- (h) I agree to use reasonable efforts to obtain additional information from the Applicant as FTIAust may request;
- (i) I agree to not knowingly do anything to put FTIAust in breach of the AML/CTF Act and Rules; and
- (j) I agree to notify FTIAust immediately if I become aware of anything that would put FTIAust in breach of the AML/CTF Act and Rules.

To comply with AML/CTF laws we require you to disclose whether you are, or have an association with, a Politically Exposed Person (“PEP”). A PEP is an individual who holds a prominent public position or function in a government body or an international organization in Australia or overseas. Please tick one of the boxes below if any investor (including a beneficial owner) is a PEP.

- Head of State or head of a country or government;
- Government minister or equivalent senior politician; or senior government official;
- Judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge of a court of equivalent seniority in a foreign country or international organisation;
- Governor of a central bank or any other position that has comparable influence to the Governor of the Reserve Bank of Australia;
- Senior foreign representative, ambassador, or high commissioner; or high-ranking member of the armed forces;
- Board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation;

A PEP can also be an immediate family member of a person referred to above, including spouse, parent, de facto partner, child and a child’s spouse. A close associate of a PEP, i.e. any individual who is known to have joint beneficial ownership of a legal arrangement or entity is also considered a PEP.

Name of PEP

Country of Birth

Country of Citizenship

Country of Residency

Tax Residency

Occupation / Business Activity

Where you identify as, or have an association with, a PEP, we may request additional information from you.

Note: If there is more than one PEP associated with this application, please tick the box below, photocopy this page and include the additional PEP information.

- Additional PEP information attached.

Each investor on the investment account must sign this Application Form. For joint applications, the two or more investors in whose name the investment account is held, must sign this Application Form. If signed under Power of Attorney, the attorney encloses a certified copy of the Power of Attorney and declares that he/she has not received notice of revocation of that power. If the application is for a company, two directors or a director and secretary must sign, unless the company is a sole director company, in which case the sole director only must sign.

**I/We acknowledge that by signing below:**

I/We make the declarations set out in this Application Form.

I/We certify that all the information provided in this Application Form is true and correct to the best of my/our knowledge and belief.

**Dated**



**Name of Investor 1**

**Signature of Investor 1**

**Tick capacity (mandatory for companies)**

Sole Director  Director  Secretary

**Name of Investor 2**

**Signature of Investor 2**

**Tick capacity (mandatory for companies)**

Sole Director  Director  Secretary

**Power of Attorney**

Executed by and on behalf of

**Power of Attorney Name**

**Power of Attorney Signature**

by its Power of Attorney in the presence of

**Witness Name**

**Witness Signature**