Application Form

Foreign Company and Foreign Trust (including New Zealand entities) New Zealand Dollar (NZD) Funds

Issued by Fidante Partners Limited (ABN 94 002 835 592, AFSL 234668), referred to as 'Fidante' in this form.

Dated 17 October 2022

Use this application form if you wish to invest in the fund(s) listed in **Section 17**.

This Application form can only be used by the following types of investors:

- Foreign Company (including New Zealand Companies)
- Foreign Trust (including New Zealand trusts)

Before completing this Application Form, please ensure you have read the current PDS and TMD, any information incorporated into the PDS and any updates on the Fidante website. Fidante or your financial adviser will send you a paper copy of the current PDS and TMD, any information incorporated into the PDS and any updates and application form free of charge if you so request.

Information in a PDS and TMD may change from time to time and we will update this information by updating the relevant document or by publishing an update at **fidante.com**.

Checklist

Before sending us your application, please ensure you have:

- Completed this Application Form in full.
- Provided required Customer Identity Verification documents as outlined in Section 13.
- Ensure funds are transferred at the same time as lodging your Application Form and using your investor name as a reference.
- Read the declaration and provided all relevant signatures.

Contact details

Mail your completed application form and identity verification documents to:

Fidante GPO Box 3993 Sydney NSW 2001 (no stamp required)

If you have any questions regarding this form please contact our Investor Services Team on 1300 721 637.

If you have not received a response within 10 business days of submitting your application, please call our Investor Services Team on 1300 721 637, 8:15am - 5:30pm AEST, Monday - Friday.



Email address

Application Form
Foreign Company and Foreign Trust
New Zealand Dollar (NZD) Funds





1 Investmen	nt details
Please indicate (X) if this is	a new investment or an additional investment.
☐ New investment ▶ Pl	ease proceed to section 2.
Additional investment	
Existing account name	
Existing account number	
If any of your information I	nas changed since your prior investment, please complete sections 2-6, otherwise, proceed to section 7.
2 Fatth ton	
2 Entity type	a
Please indicate (X) the ent	
	Complete sections 3, 4, 6–17.
	vidual trustee ► Complete sections 3, 5–17.
Foreign trust with fore	ign company trustee ► Complete sections 3-17.
3 Contact d	etails
Please provide details of w	rhere you would like all correspondence mailed and your contact details.
C/- (if applicable)	
Unit	Street number PO Box
Street name	
Suburb	State Postcode
Country	
Phone (after hours)	Phone (business hours)
Mobile	Facsimile Facsimile

Foreign company (including company trustee)

4A. Company details (including company trustee)		
Full name of foreign company or foreign company trustee			
Business name (if applicable))		
Country of formation/incorporation/registration			
	Select (X) if registered by a foreign body and provide r	name of body.	
Is the foreign company	y registered with ASIC? (select (X) ONE of the following	ng)	
☐ Yes ▶ Provide ARBN			
► Provide EITHER	(cross (X) one box)		
	principal place of business address in Australia OR		
	local agent name and address details.		
Address (cannot be	e a PO Box)		
Street name and number			
Suburb		State	Postcode
Country			
Name of local agent in Australia			
☐ No ▶ Provide company	y identification number (if any) issued by the foreign registra	ition body.	
Principal place of b	usiness in the company's country of formation or incorpora	ation (PO Box is NO	Γacceptable)
Street name and number			
Suburb		State	Postcode
Country			
	company ess as registered with ASIC. If the company is NOT registered poration or registration (if any).	d with ASIC, provide	the registered address in the
Street name and number			
Suburb		State	Postcode
Country			

Foreign company (including company trustee) (continued)

Co	Company type – complete questions 1 and 2 below.					
1.	1. Select (X) whether the company is a private/proprietary or public company.					
	Private or proprietary					
	Public					
	For private/proprietary c	ompanies provide names of	all directors			
	Director 1					
	Director 2					
	Director 3					
	Director 4					
	If there are additional dire	ectors, please (X) this box and	d provide their full names on a se	parate piece of paper ar	nd attach it to this form.	
2.	Select (X) the applicable	category of company and pr	rovide details if requested:			
	Listed on Australian or No	ew Zealand stock exchange (A	ASX, NZX)			
	Name of market/ exchange					
	If your company is acting	as a trustee for a trust 🕨 Pro	oceed to section 4B .			
	If your company is investing	ng in its own right 🕨 Proceed to	to section 7.			
	Other Proceed to sect	ion 4B.				
4B	. Substantial Shareho	older details				
			ership, directly or indirectly, of 25 Idings through a chain of compa		oany's issued share capital.	
Doe	es the company have any s	substantial shareholders?				
	Yes ▶ Please provide de	etails below.				
	No ▶ Proceed to section	on 4C.				
Sul	ostantial shareholder	r 1				
Suri	name					
Full	Il given name(s)					
Dat	e of birth	/ /				
Res	idential address (cannot b	e a PO Box)				
Stre	et name and number]		
Sub	urb			State	Postcode	
Cou	intry					

Foreign company (including company trustee) (continued)

Substantial shareholder	~ 2
Surname	
Full given name(s)	
Date of birth	
Residential address (cannot b	e a PO Box)
Street name and number	
Suburb	State Postcode Postcode
Country	
If there are additional sub this form.	estantial shareholders, please (\mathbf{X}) this box and provide their full details on a separate piece of paper and attach it to
4C. Directors authorisin	ng investment
Individuals below will be the s	ignatories signing in section 16 .
Sole or Primary Directo	r
Cross this box if same as	Substantial shareholder 1' in section 4B. If different, please complete below.
Surname	
Full given name(s)	
Title (Mr/Mrs/Miss/Ms)	Date of birth //
Residential address (cannot b	e a PO Box)
Street name and number	
Suburb	State Postcode Postcode
Country	
Second Director or Secr	
	Substantial shareholder 2' in section 4B. If different, please complete below.
Surname	
Full given name(s)	
Title (Mr/Mrs/Miss/Ms)	Date of birth / /
Residential address (cannot b	e a PO Box)
Street name and number	
Suburb	State Postcode Postcode
Country	

5 Foreign Trust

5A. Details of Foreign T	rust			
Full name of trust				
Country of establishment				
Name of trust settlor				
(the individual who contribute	ed the initial funding on trust establishn	nent).		
	t and provide information requested:			
Foreign superannuation f				
Private trust (family trust,	, discretionary trust)			
Charitable trust Other trust, provide type				
5B. Trust beneficiary de	etails			
income/assets. Where a trust when disclosing whether they	are individuals specified in the trust deed beneficiary is a company you must cons are a substantial trust beneficiary. any substantial trust beneficiaries?			
Yes ► Please provide of	,			
	ner beneficiaries' below.			
Substantial trust benef				
Surname				/ /
Full given name(s)			Date of birth L	/ /
Residential address (cannot b	pe a PO Box)			
Street name and number				
Suburb		State		Postcode
Country				
Substantial trust benef	iciary 2			7
Surname		1		
Full given name(s)	ull given name(s)			
Residential address (cannot b	pe a PO Box)			
Street name and number				
Suburb		State		Postcode
Country				
If there are additional sub	ostantial trust beneficiaries, please (X) the	nis box and provide their full deta	uils (as noted ab	pove) on a separate piece of

Foreign Trust (continued)

	peneficiaries any other beneficiar	ies?			
Yes	Yes Please provide details below, then proceed to 'Beneficiary classes' below.				
☐ No	► Proceed to 'Ben	eficiary classes' below.			
	ciary classes trust deed refer to b	eneficiaries in relation to membership of a class?			
Yes	► Please list each	class below.			
	Class 1				
	Class 2				
	If there are oth it to this form.	er beneficiary classes, please (X) this box and provide them on a separate piece of pa	per and attach		
☐ No	► Please proceed	50 5C.			
5C. Det	ails of Trustee(s				
Please inc	dicate (X) the trustee	type:			
Indivi	idual Trustee(s)	► Please complete below.			
	gn Company Trustee				
		for the indicated individual. Please note that all fields are mandatory.			
Individu	ual Trustee 1 (pri	mary trustee)			
Surname					
Full given	name(s)				
Title (Mr/	Mrs/Miss/Ms)	Date of birth	/ /		
Residenti	ial address (cannot b	e a PO Box)			
Street nar	me and number				
Suburb		State	Postcode		
Country					
•	ual Trustee 2				
Surname					
Full given	name(s)				
Title (Mr/	Mrs/Miss/Ms)	Date of birth	/ /		
Residential address (cannot be a PO Box)					
Street nar	me and number				
Suburb		State	Postcode		
Country					
For unreg	gulated trusts, are the	ere other individual trustees?			
Yes	Yes If there are other individual trustees, please (X) this box and provide their details (as shown above) on a separate piece of paper and attach it to this form.				
☐ No					

Other individuals controlling the entity You do not need to complete this section if the entity is a listed company investing in its own right as declared in section 4A. Are there any individuals exercising control over your entity other than those already listed in sections 4 or 5 of this form? If your entity is a Trust with Company Trustee, consider both the Trust and the Company Trustee when answering this question. ► Please provide their details below. ▶ Proceed to section 7. No Individual 1 Individual 2 Capacity / Role Capacity / Role Surname Surname Full given name(s) Full given name(s) Title Title Date of birth Date of birth Residential address Residential address (cannot be PO Box) (cannot be PO Box) If there are more individuals controlling the entity, please select (X) this box and provide their roles, full names, dates of birth and residential addresses on a separate piece of paper. Source of funds Please indicate (X) the source of funds being invested. lncome from employment – regular and/or bonus 🔲 Investment income (e.g. rent, dividends, pension) 🔲 Business income One-off payment (e.g. matured investment, court settlement, redundancy, inheritance) Sale of assets (e.g. shares, property) Windfall (e.g. gift, lottery winnings) Borrowed funds ☐ Charitable donations Nominated bank account ☐ Please use existing bank account on file. Please use bank account provided below.

Please use existing bank account | Please use existing bank account provided below. Unless requested otherwise, this will also be the bank account we credit any withdrawal proceeds and/or distributions if you requested these to be paid to you and not reinvested. The nominated account details in this section, you authorise Fidante to use these details for all future transaction requests that you make until notice is provided otherwise. For additional investments, a nomination in this section overrides any previous nominations. | Account name | Branch number (BSB) | Account number | Account nu

Investment and distribution method

Please write the full fund name, fund code, investment amount, regular investment plan (if applicable) and distribution options. Refer to section 16 for the listing of funds, fund codes and minimum initial investment amounts.

		Investment amount (subject to the minimum initial investment)	Additional investment amount	Distribution options (select (X) one option per fund) ¹	
Fund Name	Fund code		(subject to the minimum additional investment)	Reinvest	Cash payment
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		

Fidante may, in its absolute discretion, refuse any application for units. Persons external to Fidante or other entities who market Fidante products are not agents of Fidante but are independent investment advisers. Fidante will not be bound by representations or statements which are not contained in information disseminated by Fidante.

O Additional information

Complete this section if any of the below conditions apply to your entity:			
• The entity is incorporated or formed outside of Australia or New Zealand			
• Any of the individuals listed on this form have their residential address or tax residency or	outside Australia or New Zealand; or		
 Entity is investing \$1m or more; or Entity is a charity, aid organisation, foundation or a not-for-profit organisation. 			
• Entity is a charity, aid organisation, foundation of a not-for-profit organisation.]	
Purpose or activities of the entity	Date of formation /////		
Select primary source of the overall wealth of the entity			
Investment income (e.g. rent, dividends) Business income			
One-off payment (e.g. matured investment, court settlement, redundancy, inheritanc	ce) Sale of assets (e.g. shares, property)		
Borrowed funds Charitable donations			
Select primary source of the overall wealth of all individuals listed in this application form.	You may select multiple options that apply.		
Income from employment – regular and/or bonus Investment income (e.g. rent,			
Business income One-off payment (e.g. matured investment, court settlement, redundancy, inheritance)			
Sale of assets (e.g. shares, property) Windfall (e.g. gift, lottery winnings) Borrowed funds			
Government benefits (e.g. family tax benefits)			
Is your entity a charity, aid organisation, foundation or a not-for-profit organisation?			
Yes Does it provide financial or other support to recipients overseas?			
☐ Yes ► Please list destination countries ☐			
□ No			

A copy of the annual report for the Fund(s) will be provided on the Fidante website **fidante.com**. Please cross (**X**) this box if you wish to receive a paper copy of the annual report(s) for the Fund(s) in which you are invested. If you choose to have an annual report mailed to you, it will be mailed to the address provided in **section 3** or your current address on file for existing investors.

12 Global Tax Reporting Requirements (CRS/FATCA)

Information about investors that are foreign tax residents must be reported to the Australian Taxation Office (ATO) in accordance with international tax reporting standards and laws to which Australia is subject. These include the OECD Common Reporting Standard (CRS) and United States Foreign Account Tax Compliance Act (FATCA). If you require further information on Australia's obligations under CRS or FATCA, please visit the ATO website **www.ato.gov.au**.

please visit the ATO website www.ato.gov.au .			
12A. Entity Type			
Select the appropriate entity type from one of the 4 options below and provide requested information.			
1. A Financial Institution (A custodial or depository institution, an investment entity or specified insurance company for FATCA/CRS purposes)			
Provide the entity's Global Intermediary Identification Number (GIIN), if applicable			
If the entity is a Financial Institution but does not have a GIIN, provide its FATCA status (select one)			
Deemed Compliant Financial Institution			
Excepted Financial Institution			
Exempt Beneficial Owner			
Non Reporting IGA Financial Institution			
(If the Entity is a Trustee- Documented trust, provide the Trustee's GIIN)			
Non participating Financial Institution			
US Financial Institution			
Other (Describe the Company's FATCA status in the box provided)			
Please answer the question below for all Financial Institutions			
Is the Financial Institution an Investment Entity located in a Non-Participating CRS Jurisdiction and managed by another Financial Institution?			
Yes ▶ Please proceed to section 12B (Foreign Controlling Persons).			
No ▶ Proceed to section 13.			
2. Public Listed Company, Majority Owned Subsidiary of a Public Listed Company, Governmental Entity, International Organisation, Central Bank, an Australian Registered Charity or Deceased Estate. Proceed to section 13.			
3. A Foreign Charity or an Active Non-Financial Entity (NFE) (Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held produced passive income.			
For other types of Active NFEs, refer to section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at www.oecd.org .)			
If the entity is a Foreign Charity or an Active NFE, please proceed to section 11C (Country of Tax Residency).			
4. Other (Entities that are not previously listed - Passive Non-Financial Entities)			
Please proceed to section 11B (Foreign Controlling Persons).			

Flobal Tax Reporting Requirements (CRS/FATCA) (

IZ Global lax R	Reporting Requirements	(CRS/FATCA) (continu	ied)
12B. Foreign Controllin	g Persons		
	country. Whether an individual is a tax resid nds in a country, the location of a person's r		
Are any of the individuals liste residents of countries other the	ed in the application form (as directors, subs han Australia?	stantial shareholders, trustees, trust	settlors or trust beneficiaries) tax
	ch individual's full name, date of birth, resident		nd tax identification number (TIN) or
an equivalent belo No ► Proceed to 12C.	w. Please include multiple countries and TII	Ns, if applicable.	
	by each country for the purposes of admin the US. If a TIN is not provided, please list		
Individual 1			
Full name			
Country 1		TIN	If no TIN, list reason A, B or C
Country 2		TIN	If no TIN, list reason A, B or C
Country 3		TIN	If no TIN, list reason A, B or C
Individual 2			
Full name			
Country 1		TIN	If no TIN, list reason A, B or C
Country 2		TIN	If no TIN, list reason A, B or C
Country 3		TIN	If no TIN, list reason A, B or C
Individual 3			
Full name			
Country 1		TIN	If no TIN, list reason A, B or C
Country 2		TIN	If no TIN, list reason A, B or C
Country 3		TIN	If no TIN, list reason A, B or C
Reason B - I have not been iss	x residency does not issue TINs to tax resid sued with a TIN. x residency does not require the TIN to be o		
12C. Country of tax res	idency for entity		
Is the entity a tax resident of	a country other than Australia?		
	ne entity's country of tax residence and tax i than one other country, please list all releva		alent below. If the entity is a tax
1. Country		TIN	If no TIN, list reason A, B or C
2. Country		TIN	If no TIN, list reason A, B or C
3. Country		TIN	If no TIN, list reason A, B or C
4. Country		TIN	If no TIN, list reason A, B or C
Reason A - The country of tax	x residency does not issue TINs to tax resid	ents.	

Reason B - I have not been issued with a TIN.

∐ No

Reason C - The country of tax residency does not require the TIN to be disclosed.

13 Customer identity verification

If you do not have an existing investment with Fidante, you must complete this section. If you are lodging this application through a financial adviser, they are required to provide us with copies of the identity verification documents. If you are not lodging this application through a financial adviser, you are required to provide us with **certified copies** of the identity verification documents. Please see below for a list of who can certify the documents.

Individuals

- Individual Trustee 1 (primary trustee) if you completed section 5C.
- Individual Trustee 2 (if signing the application form) if you completed section 5C.
- Each substantial trust beneficiary if you completed section 5B.
- Each substantial shareholder (of company or company trustee) if you completed section 4B.
- Primary/Sole Director and Second Director/Secretary (of company or company trustee) if you completed section 4C.
- Any other controlling individuals listed in section 6.

Please	provide	either	A or	В.
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A. A valid copy of one of the following documents:				
Australian driver's licence containing your photogr.				
Australian passport containing your photograph ar	-			
A card issued under an Australian State or Territory	law containing your photograph and proof of age.			
B. Or if one of the above cannot be provided please provid	e one document from Group 1 and one document from Group 2 below:			
Group 1	Group 2			
A copy of one of the following documents:	(The document must contain your full name and current residential address as provided in sections 4-6 of the application form)			
Australian birth certificate or birth extract; or	A copy of one of the following documents issued to you:			
Australian citizenship certificate; or	a notice or bill issued within the preceding three months from a local government body or utilities provider that records the provision of			
Pension or Health care card issued by Centrelink or Department of Veterans' Affairs.	services to you, e.g.: - council rates notice			
	electricity billgas bill			
	water rates notice			
	• telephone bill			
	• internet services bill			
	a letter or notice issued within the preceding 12 months from a			
	Commonwealth or State/Territory government department that records the			
	provision of financial benefits to you, e.g.:			
	pension statementrent assistance statement			
	mobility allowance statement			
	utilities allowance statement			
	a letter or notice issued to you within the preceding 12 months from the			
	ATO that records a debt or refund payable by or to you, e.g.:			
	• notice of assessment			
	payment reminder			
lf you are a non-Australian resident and cannot provide A or	B, please provide a valid copy of ONE of the following:			

Please note:

· documents are required to be certified copies of the original;

foreign driver's license that contains your photograph.

- documents such as passports, driver's licences and other cards that have an expiry date must not have expired (however, only Australian passports that have expired within the preceding two years may be accepted);
- if any document is in a language other than English, then it must be accompanied by an English translation prepared by an accredited translator; and
- if any document is in a previous name, then it must be accompanied by evidence of the change of name (e.g. a marriage certificate).

foreign passport, or similar travel document bearing your signature and photograph;

national identity card issued by a foreign government that contains your photograph, and either your signature or your unique

13 Customer identity verification (continued)

Foreign company (including company trustee)	
For a foreign company or company trustee, complete verification Foreign Trust verification procedure below.	procedure 1 or 2 below. For the trust (if applicable) please also complete the
1. Foreign companies registered with ASIC	
Information required to be verified Please ensure the document(s) you provide confirm(s) the following:	Verification options Please cross (X) which document(s) you have provided:
 Full name of the company as registered by ASIC. ARBN issued to the company. Whether registered by a foreign registration body and if so; whether registered as a private company or a public company. 	Up-to-date extract from ASIC database; or Up-to-date extract from relevant foreign registration body; or If the ASIC or foreign registration body database is not reasonably available, an original or certified copy of the certificate of registration issued by ASIC or by the relevant foreign registration body.
2. Foreign companies NOT registered with ASIC	
Information required to be verified Please ensure the document(s) you provide confirm(s) the following:	Verification options Please cross (X) which document(s) you have provided:
 Full name of the company. Unique ID/registration number issued to the company by a foreign registration body. Whether registered by a foreign registration body and if so; whether registered as a private company or a public company. 	Up-to-date extract of the relevant foreign registration body. If the foreign registration body database is not reasonably available, an original or certified copy of the certificate of registration issued by the relevant foreign registration body.
Foreign Trust	
For a foreign trust, complete below.	
Information required to be verified Please ensure the document(s) you provide confirm(s) the following:	Verification options Please cross (X) which document(s) you have provided:
All trustsFull name of Trust.Name of Trust settlor.	All trusts Please provide documentation confirming the existence of the trust and the name of the settlor (e.g. trust deed or extract of the trust deed).
How to certify your documents	
and a photocopy to one of the people listed in the categories below	py of an original document. To certify a document, take the original document ow and ask them to certify that the photocopy is a true and correct copy of the e and the capacity in which they are signing (eg postal agent, Justice of the
Sample wording	
I, [full name], a [category of persons listed below], certify that thi	is [name of document] is a true and correct copy of the original.
[Signature and date]	

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

Customer identity verification (continued)

Who can certify documents?

Financial corporations (bank, building society, credit union)	 Officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993 (Cth)) Finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993 (Cth))
	• Officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more continuous years of service with one or more licensees
Post office	• Permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public
	 Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
JP	• Justice of the Peace
Legal	• Person who is enrolled on the roll of the Supreme Court of a state or territory, or the High Court of Australia, as a legal practitioner (however described)
	• Judge of a court
	• Magistrate
	Chief executive officer of a Commonwealth court
	Registrar or deputy registrar of a court
	Notary public (for the purposes of the Statutory Declaration Regulations 1993 (Cth))
	A person authorised as a notary public in a foreign country.
Police	Australian police officer
Diplomatic service	Australian consular officer
	Australian diplomatic officer (within the meaning of the Consular Fees Act 1955 (Cth))
Accountant	• Member of the Institute of Chartered Accountants in Australia, Certified Practising Accountants (CPA) Australia or the National Institute of Accountants with two or more years of continuous membership
Foreign certification, investors r	may use the equivalent of these options. If these cannot be accessed, please contact us directly.

Declaration and applicant(s) signature(s)

Please read the declarations below before submitting this application.

I/We declare that:

- I/we have received and accepted this offer in Australia or New Zealand;
- all details in this application (including all related documents provided) are true and correct and I/we indemnify the responsible entity of the fund(s) I/we am/are investing in against any liabilities arising from acting on any of the details or any future details provided by me/us in connection with this application which are deliberately false or misleading;
- I/we have received a copy of the current PDS and TMD and all information incorporated into the PDS to which this application applies and have read them and agree to the terms contained in them and to be bound by the provisions of the current PDS (including the incorporated information) and current constitution (each as amended from time to time);
- If I/we have received this PDS from the internet or other electronic means, that I/we have received it personally or a print out of it, accompanied by or linked to this application form;
- I/we have legal power to invest in accordance with this application and have complied with all applicable laws in making this application;
- unless alternative authority is notified to and accepted by Fidante, the person/persons that has/have completed the application is/are authorised to operate the account on behalf of the investor and bind the investor for future transactions, including in respect of additional applications and withdrawals;
- the details of my/our investment can be provided to the adviser group or adviser named in this application;
- if investing as trustee, on behalf of a superannuation fund or trust I/we confirm that I/we am/are acting in accordance with my/ our designated powers and authority under the trust deed. In the case of superannuation funds, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993;
- in the case of superannuation funds with two or more trustees, the trustees agree that unless otherwise expressly indicated on this application form, either investor is able to operate the account and bind the other investor/s for future transactions, including additional deposits and withdrawals (including withdrawals by fax);
- if the application is made under Power of Attorney, the Attorney declares that he/she has not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with the application unless we have already sighted it);
- I/we have read and understood BoardRoom's Terms of Use for the use of the online service and release and indemnify Fidante from and against any liabilities whatsoever arising out of it acting on any communications received by BoardRoom under those terms or in connection with the use of the online service;
- By providing my email and/or mobile number, I agree to be notified of and receive important disclosure documents and communications electronically (which include via email, SMS, a link to a website, an application or other online channels);
- I/We agree that any notice, document or other information required to be given to me/us under law (or the agreement with you), including but not limited to Product Disclosure Statements, Financial Services Guides, periodic statements, confirmations of transactions and ongoing disclosures, may be given in one of the following ways (where permitted by law): (i) by sending it to an email address I/we have provided for me/us or my/our adviser; (ii) by sending me/us or my/our adviser an email or other electronic communication providing a website reference or hypertext link to the notice, document or information; or (iii) by making the notice, document or information available on the website or an application or other online facilities as notified to me/us or my/our adviser from time to time.
- I/we acknowledge that none of Fidante, Challenger Limited, or any other member of the Challenger group of companies or any custodian, registry or investment manager, guarantees the performance of the Fund(s) or the repayment of capital or any particular rate of return or any distribution:
- Fidante is not an authorised deposit-taking institution (ADI) for the purpose of the Banking Act 1959 (Cth), and its obligations do not represent deposits or liabilities of an ADI in the Challenger Group (Challenger ADI) and no Challenger ADI provides a guarantee, or otherwise provides assurance in respect of the obligations of Fidante. Investments in the Fund(s) are subject to investment risk, including possible delays in repayment and loss of income or principal invested. Accordingly, the performance, the repayment of capital or any particular rate of return on your investments are not guaranteed by any member of the Challenger Group;
- The Responsible Entity accepts no responsibility for any failure to receive application amounts or payments before or after the transaction date arising as a result of, among other things, processing of payments by financial institutions.

In relation to my/our personal information:

- I/we acknowledge that I/we have read and understood the information relating to privacy and personal information contained in the relevant PDS and Additional Information Booklet (AIB);
- I am/We are aware that until I/we inform Fidante otherwise, I/we will be taken to have consented to all the uses of my/our personal information (including marketing) as described in the PDS and AIB and I/we have consented to my/our financial adviser providing such further personal information to Fidante as is required or reasonably deemed necessary by Fidante Partners under applicable law. Any personal information provided about a third party (if any) in connection with this application has been provided with their knowledge and informed consent;
- I/we understand that if I/we fail to provide any information requested in this application form or do not agree to any of the possible uses or disclosures of my/our information as detailed in the PDS and AIB (except in relation to direct marketing), my/our application may not be accepted by Fidante and I/we agree to release and indemnify Fidante in respect of any loss or liability arising from its inability to accept an application due to inadequate or incorrect details having been provided.

15 Signature(s)

gnature 1		Signature 2	
gnature		Signature Date	/ /
ırname		Surname	
ven name(s) apacity	Director Company Secretary	Given name(s) Capacity	Director Company Secretary
	Primary Trustee (Individual)		Secondary Trustee (Individual)
			COMPANY SEAL

16 Fund listing

Below is a listing of the Funds available for investment. Refer to section 9 to indicate your investment and distribution choices.

If making your payment via electronic funds transfer for the Funds listed below, please use the following bank account:

Bank Account Name: Fidante Partners Limited

BSB: 031-509

Account: 0166470000 Reference*: <Investor Name>

 ${}^{*}\text{This}$ reference allows us to confirm receipt of payment on our bank statement

Fund Name	Fund code	Minimum initial investment	PDS Date
Bentham Global Income Fund NZD	486	NZ\$50,000	17 October 2022
Bentham Syndicated Loan Fund	487	NZ\$50,000	17 October 2022

17 Adviser use only

	are that the attached document(s) are true copies of the document(s) used to satisfy the identity verification plied with my obligations under the Anti-Money and Counter-Terrorism Financing Act 2006.
Adviser number	
Office name	
Surname	
Given name(s)	
Title (Mr/Mrs/Miss/Ms)	Phone (business hours)
Adviser group	
Adviser group AFSL	
Adviser signature Date	
Investment Link information	
being provided. Fidante may Fidante products are not ago or statements which are not	handed to any person unless the relevant PDS and access to the information incorporated into the PDS is also in its absolute discretion refuse any application for units. Persons external to Fidante or other entities who market ents of Fidante but are independent investment advisers. Fidante Partners will not be bound by representations contained in information disseminated by Fidante. Personal information collected on this form will be handled in policy available at fidante.com .