

Redemption Request Form

As per the Information Memorandum, redemption requests will be chronologically added to the Fund's Redemption List. The Fund may accept and pay out redemption requests, at the end of each month at the Trustee's discretion and subject to the Corporations Act. There is no guarantee that the redemption will be acted on in the month requested. Subject to the Trustee accepting a redemption request, the Fund will only pay a redemption if it has available cash to pay from the Fund's Capital Account. The Fund will pay accepted redemption requests in order of the date that the redemption request was added to the Redemption List. If the amount of the redemption request at the top of the Redemption List is greater than the amount in the Fund's Capital Account, then that redemption request may be partly paid and the remaining redemption amount will be carried over to the following month. All other unmet redemption requests in the Redemption List will be carried over until the following month. The Investor can remove their redemption request from the Redemption List with a written request to the Trustee, however, it will be at the Trustee's discretion as to whether they accept the removal of the redemption request from the Redemption List.

Investor Number

Investor Name

REDEMPTION AMOUNT

Please indicate if you would like to withdraw the total amount of your investment or a partial amount.

Class or Series (if applicable):

☐ Full withdrawal

☐ Partial withdrawal, please state amount or units to be withdrawn:

\$AUD

OR

UNITS

CONTACT DETAILS

Contact Name

Contact Number

PAYMENT OF PROCEEDS

☐ Pay into the account previously advised OR

☐ Pay redemption proceeds into following account:

IMPORTANT INFORMATION: Additional security checks to verify bank account changes will be performed before the payment of your redemption proceeds if the bank account provided does not match bank account that is currently recorded in our records under your investment or if you have changed your bank account details.

Account Name:

Bank:

BSB

Account Number

DECLARATION AND AUTHORISATION

Please make sure you have completed the 'Full or Partial Withdrawal' section above.

- In signing, I/we authorise that these instructions be made on my/our behalf and acknowledge that this form is provided on the basis that the Trustee will affect it accordingly to the terms and conditions of the applicable current Information Memorandum INFORMATION MEMORANDUM.

Signature

Name and title of Signatory (block letters please)

Date

Signature

Name and title of Signatory (block letters please)

Date

Please note it's up to the investor to ensure Alexander Funds Management have been notified of authorised signatories on this account. Where the signature cannot be matched to the initial application form or signatory list provided there may be delays in processing of this request.

COMPLETED FORM

Please return the completed form by email to AHYF@alexanderfunds.com.au and alexander@oneregistryservices.com.au