BULK OFF-MARKET TRANSFER FORM - MANAGED FUNDS



Important - the buyer and the seller must sign both pages of this form.

	SECTION A - Transferor(s) and Transferee(s) to complete the below details					
Seller /	Account number					
From Account						
	s of Seller Full nan	ne(s) of Transferor	(s)			
Holder Name						
Designation						
Bedignation						
Transferor(s) / Sel	ler(s) sign here					
Signature of Investor / Director / Trustee			Signature of Joint Investor / Director 2 / Trustee 2			
		Date		Date		
Name			Name			
rune			Name			
Buyer /	Account number					
To Account						
Registration Details	s of Buver Full nam	ie(s) of Transferee(e)			
	or Bayer rail nam	` '	٥)			
Holder Name	or Bayor rail nam		s)			
	o Bayer all nam		5)			
Designation	o Dejer umam		s)			
Designation			s)			
Designation Full postal address			S)			
Designation			s)			
Designation Full postal address			Country			
Designation Full postal address Postal Address	of Transferee(s)					
Designation Full postal address Postal Address	of Transferee(s) State / Territory					
Designation Full postal address Postal Address Postcode	of Transferee(s) State / Territory rer(s) sign here			stee 2		
Postcode Transferee(s) / Buy	of Transferee(s) State / Territory rer(s) sign here	·	Country			
Postcode Transferee(s) / Buy	of Transferee(s) State / Territory rer(s) sign here		Country	stee 2 Date		
Postcode Transferee(s) / Buy	of Transferee(s) State / Territory rer(s) sign here	·	Country			
Postal Address Postcode Transferee(s) / Buy Signature of Investor /	of Transferee(s) State / Territory rer(s) sign here	·	Country Signature of Joint Investor / Director 2 / Tru			

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AF IN Code	Name of the Manageu Fund	No. or orits	(\$AUD)	Date			
			,				
Signed as per Section A:							
I/We the registered holder(s) and the undersigned seller(s) for the above Consideration do herby transfer to the above name(s) hereinafter called the Buyer(s) the securities as specified above standing in my/our name(s) In the books of the above named Companies, subject to the several conditions on which I/we held the same at the time of signing hereof and I/we the Buyer(s) do herby agree to accept the said securities subject to the same conditions. I/we have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable). Transferor(s) / Seller(s) sign here							
		0		0			
Signature of Investo	r / Director / Trustee	Signature of Joir	nt Investor / Director 2 / Tru	stee 2			
Transferee(s) / Buyer(s) sign here							
Signature of Investor	r / Director / Trustee	Signature of Joir	nt Investor / Director 2 / Tru	stee 2			

SECTION B - Complete the below managed funds to be transferred

Return this completed form and any supporting documents to your Nominated Representative. Or post directly to Praemium Support Team, PO Box 322, Collins St West VIC 8007.

This form is for Praemium Spectrum accounts issued by Praemium Australia Limited ("Praemium", "Operator") ABN 92 117 611 784 AFSL 297956.

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