

# Withdrawal request form

Please use this form to make a partial or full withdrawal from your existing investment.

Investor name

## Withdrawal instructions

Enter either the Australian dollar amount or number of units you wish to withdraw below. If you wish to withdraw the full amount please tick 'Full withdrawal'. This request must meet the minimum remaining account balance of \$25,000 per fund as set out in the PDS, otherwise your withdrawal request will be rejected.

Fund name	APIR Code	Partial withdrawal	Full withdrawal	
		Amount (dollars)		
Fortlake Real-Income Fund	TAL0590AU	<input type="text"/>	or	<input type="checkbox"/>
Fortlake Real-Higher Income Fund	TAL0284AU	<input type="text"/>	or	<input type="checkbox"/>
Fortlake Real Opportunities Fund (Wholesale)	TAL7471AU	<input type="text"/>	or	<input type="checkbox"/>
Fortlake Sigma Opportunities Fund (Wholesale)	TAL1576AU	<input type="text"/>	or	<input type="checkbox"/>

## Withdrawal payment instructions

Select the appropriate box below:

Pay to the existing bank account held on file.

## Declaration and signature

By signing this form, I/we:

- declare that I/we have read and understand the current (and any Supplementary) PDS or IM for the relevant Fortlake fund(s);
- declare that all details provided in this Withdrawal request form are true and correct and I/we undertake to inform you of any changes to the information supplied as and when they occur;
- (If signing under power of attorney) declare that I/we have not received notice of revocation of that power;
- authorise Link Fund Solutions to act upon instructions by post (as applicable) with regard to the units in fund(s) subscribed for (and any further units acquired) or any matter in connection with them or any of them without liability in respect of any transfer, payment or any other act done in accordance with such instructions and notwithstanding the same was not signed or sent by me/us. I/we agree that this authorisation shall remain in force until notice in writing of its termination is received by Link Fund Solutions;
- acknowledge and agree to be bound by the terms and conditions as outlined in the Application Form;

- acknowledge that investments in the fund are subject to Investment risk, including possible delays in repayment and loss of principal invested;
- acknowledge and agree that personal information about me/us may have been collected, used and disclosed in accordance with Fortlake's Privacy Policy including marketing purposes.

**Important:** If we receive your correctly completed withdrawal request before the cut-off time\* on a business day, it will be processed using the unit price calculated for that day. Where we receive correct documentation after the cut-off time\*, we are taken to have received it the next day and it will be processed using the unit price determined for the following business day.

\*Refer to the PDS for the cut-off time.

**Who must sign:** All investors, trustees, partners or office bearers must sign. If a company, two directors, a director and a company secretary, a sole director and sole company secretary or duly appointed attorneys must sign. If signing under a power of attorney, they must have previously been noted by the registry.

### Important information

This application form is in respect of, and accompanies, the PDS or IM documents that offer units in the funds issued by Trustees Australia Limited (ABN 63 010 579 058 AFSL No. 260 038). Trustees Australia Limited (TAL, we, us, our) is the responsible entity for the funds offered in the PDS and IM.

### Signature 1

Name

Date

 /  / 

- |   |  |
|---|--|
| <input type="checkbox"/> Investor 1 (individual)                          | <input type="checkbox"/> Director                    |
| <input type="checkbox"/> Secretary  | <input type="checkbox"/> Sole director and secretary |
| <input type="checkbox"/> Non-corporate trustee                            | <input type="checkbox"/> Partner                     |
| <input type="checkbox"/> Other office bearer or attorney (please specify) | <input type="text"/>                                 |

### Signature 2

Name

Date

 /  / 

- |   |                                   |
|---|-----------------------------------|
| <input type="checkbox"/> Investor 2 (individual)                          | <input type="checkbox"/> Director |
| <input type="checkbox"/> Secretary  | <input type="checkbox"/> Partner  |
| <input type="checkbox"/> Non-corporate trustee                            |                                   |
| <input type="checkbox"/> Other office bearer or attorney (please specify) | <input type="text"/>              |

**Once completed, please send this form to:**

Fortlake Asset Management  
PO Box 3721  
Rhodes NSW 2138

We do not accept fax or email copies.

**Important: We will only accept requests where you have instructed us to pay to an existing bank account held on file.**

**Important: Electronic communication is inherently unreliable and confirmation of receipt by Fortlake should be sought by contacting Client Services. Fortlake will not accept a facsimile receipt from your machine or your email record as evidence of our receipt of any electronic communication via facsimile or email.**

**Important: Your investor account will be closed if you fully redeem all your investments. Therefore, a new application form must be completed should you wish to invest with Fortlake in the future.**

If you have any questions, please contact our Client Services team on 1300 110 344 or email [enquiries@fortlake.com.au](mailto:enquiries@fortlake.com.au)

