

# Change of distribution election form

Please use this form to change your distribution election if you are an existing investor.

Investor number

Contact number

Investor name

## Distribution election

You may elect to receive distributions as cash or reinvest them as additional units in the fund(s). Please indicate your preference below.

| Fund name                                     | APIR code | Distribution option*     |  |
|---|-----------|--------------------------|--|
|   |           | Reinvest                 | Deposit in existing account held on file |
| Fortlake Real-Income Fund                     | TALO590AU | <input type="checkbox"/> | <input type="checkbox"/>                 |
| Fortlake Real-Higher Income Fund              | TALO284AU | <input type="checkbox"/> | <input type="checkbox"/>                 |
| Fortlake Real Opportunities Fund (Wholesale)  | TAL7471AU | <input type="checkbox"/> | <input type="checkbox"/>                 |
| Fortlake Sigma Opportunities Fund (Wholesale) | TAL1576AU | <input type="checkbox"/> | <input type="checkbox"/>                 |

## Declaration and signature

By signing this form, I/we:

- declare that I/we have read and understood the current PDS for the relevant fund(s);
- declare that all details provided in this 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 a power of attorney) declare that I/we have not received notice of revocation of that power;
- authorise Link Market Services Limited to act upon instructions by post or email (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 Market Services Limited;
- acknowledge and agree to be bound by the terms and conditions as outlined in the form;
- acknowledge that investments in the fund are subject to investment risk, including possible delays in repayment and loss of income or 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.

**Key information:** This form is for existing investors only. If you are a new investor, please contact your financial adviser. This form is for the Fortlake Real-Income Fund, Fortlake Real-Higher Income Fund and Fortlake Sigma Opportunities Fund. It is important that you read the Product Disclosure Statement (PDS) for the relevant fund(s) before making an investment. The PDS contains important information about the risks and returns of the fund(s). You should seek professional advice if you are unsure about any aspect of the PDS or this form.

### Important information

Colonial First State Investments Limited ABN 98 002 348 352, AFSL 232468 (CFSIL, we, us or our) is the responsible entity and issuer of the Fortlake Real-Income Fund, Fortlake Real-Higher Income Fund and Fortlake Sigma Opportunities Fund. This application form accompanies each disclosure document (Product Disclosure Statement or Information Memorandum) for the funds and is for applying for interests in these funds. It is important that you consider the disclosure document for the relevant fund in its entirety before making an investment.

### 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  
C/- LINK Market Services Limited  
Locked Bag 5038  
Parramatta NSW 2124

Or email [enquiries@fortlake.com.au](mailto:enquiries@fortlake.com.au)

**Important: Electronic communication is inherently unreliable and confirmation of receipt by Fortlake should be sought by contacting Client Services.**