

INSTRUCTION FOR PAYMENT OF DIVIDEND/DISTRIBUTION

Dividends/Distributions for International Equities

Phillip Capital Limited ABN 14 002 918 247 AFSL 246827
Phillip Capital Trading Pty Ltd ABN 68 066 066 911 AFSL 246796
Together known as "PhillipCapital"

PLEASE EMAIL COMPLETED AND SIGNED FORM TO SETTLEMENTS@PHILLIPCAPITAL.COM.AU

Account Name:		Account No:	
Designation:			
INSTRUCTION			
I/We wish my/our Dividends/Distributions in respect of International Equities to be dealt with in the following manner: (choose one of the two options)			
<input type="checkbox"/> CASH. To be paid direct into my nominated Bank Account. I/We acknowledge that there will be a Handling Fee for each dividend/distribution as follows:			
<u>For each Dividend/Distribution</u>		<u>Handling Fee</u>	
Less than A\$100		A\$1.50 plus GST	
<u>For each Dividend/Distribution</u>		<u>Handling Fee</u>	
Greater than \$A100		1.5% plus GST (max fee \$A100 plus GST)	
OR			
<input type="checkbox"/> REINVESTMENT OF DIVIDEND / DISTRIBUTION			
I/We acknowledge that reinvestment of Dividends/Distributions may be subject to certain restrictions and I/we confirm that I/we are responsible for ensuring that I/we can validly take part in the Dividend/Distribution reinvestment and am/are complying with all necessary regulatory procedures and restrictions applicable to me/us.			
I/We acknowledge that there will be a Handling Fee being A\$20 plus GST for each Reinvestment of Dividend/Distribution.			

I/we authorise PhillipCapital to act in accordance with my/our instructions set out above and I/We acknowledge that these instructions supersede and have priority over previous instructions relating to the payment of dividend/distributions on my/our international equities. I/We undertake to notify PhillipCapital in writing of any change to these Instruction.
Please allow PhillipCapital up to 3 working days to process the Instruction.

Individual / Sole Director /
Director (1)

Individual (2) / Director (2) /
Secretary

Individual (3)

Signature(s):

Full Name(s):

Date(s):(DD/MM/YYYY)

_____	_____	_____
_____	_____	_____
_____	_____	_____

Please note that digital signatures are NOT accepted