

WARATAH SELECT MORTGAGE FUND

WITHDRAWAL REQUEST

WARATAH SELECT MORTGAGE FUND ARSN 089 601 052

P O Box 1242 Surfers Paradise QLD 4217

I/We hereby request withdrawal of the amount set out below from the funds I/we have invested with you.

DATE: ____ / ____ / ____ INVESTOR NO. _____

NAME: _____
(Print name of investor/s)

ADDRESS: _____

WITHDRAWAL REQUEST AMOUNT \$ _____

DATE FUNDS REQUIRED BY: _____

DEPOSIT INSTRUCTIONS (Please mark appropriate box)

- ☐ Return funds by cheque payable to _____
- ☐ Deposit funds to my/our nominated bank account, details of which are held by you
- ☐ Deposit funds to the following bank account:

Account Holder _____

Bank _____

Branch _____

BSB _____

Account No. _____

INVESTOR/S SIGNATURE/S: _____

WITHDRAWALS WILL GENERALLY ONLY BE PERMITTED AT THE EXPIRATION OF THE INVESTMENT TERM WHERE ONE MONTH'S PRIOR WRITTEN NOTIFICATION IS PROVIDED IN ACCORDANCE WITH THE PDS.