

AORIS INVESTMENT  
MANAGEMENT

## Change of Details Form

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# Change of Details Form

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Investor Name

Investor Number

## Type of Change(s) Required

Name      Contact Details      TFN/ABN      Bank Details      Operating Authority      Adviser  
Distribution Method

## New Name Details

Previous Name Details:

New Name Details:

Given Name(s)

Given Name(s)

Surname

Surname

Signature

Signature

Date

Date

**NOTE:** A certified copy of proof of the name change is required (e.g. certificate from Births, Deaths and Marriages)

## New Contact Details

Residential Address

Mailing Address

Email Address

Mobile Number

Home Phone Number

Work Phone Number

## TFN and/or ABN

Investor 1: TFN/ABN

Investor 2: TFN/ABN

**NOTE:** For trusts and superannuation funds – provide the TFN of the trust or super fund. TFNs for trustees cannot be accepted

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## New Bank Details

The following account is to be used for all future payments relating to redemptions and distributions:


Bank Name/Institution

Account Name

BSB

Account No.

**NOTE:** Only Australian and New Zealand bank, building society or credit union accounts can be accepted. For security, the bank account must be in the registered account holders name. Requests for payment to third party bank accounts or that do not contain deposit account instructions will not be processed.

 **IMPORTANT:** We also require you to attach a copy of your bank statement to verify the details provided above.

## New Account Operating Authority

Please indicate how you wish to operate your Account:

Any one of us to sign, or

Any two of us to sign, or

All of us to sign

## New Adviser or Third Party Details

Title (Mr/Mrs/Ms)

Name (in full)

Name of Company and/or Dealer Group

Postal Address

Suburb

State

Postcode

Phone

Email

Adviser or Third Party Signature

AFSL No.

**NOTE:** A certified copy of identification is required for your adviser or third party.

## Distribution Method

Reinvest or

Pay into Bank Account

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## Declaration

I/we declare that all the details in this form are true and correct.

All signature(s) on this form must match the signing authority currently held by the Registry for your investment account. If you are signing as a trustee, you warrant that, at the time of signing, you are authorised under the relevant trust deed to perform the acts contemplated by this form. If you are signing under power of attorney, you warrant that, at the time of signing, you have not received notice of revocation of that power of attorney. A certified copy of the power of attorney must be given to us with the completed form.

Signature  Date

Name

Signature  Date

Name

**NOTE:** It is up to the investor to ensure Aoris Investment Management have been notified of any changes to authorised signatories on this account.

## Post this Form

Completed form and identification documentation (where applicable) should be mailed to:

Mainstream Fund Services – Unit Registry  
GPO Box 4968 Sydney NSW 2001  
or;

registry@mainstreamgroup.com  
1300 127 780 or +61 2 8259 8566