## MANAGED FUND TRANSFER INSTRUCTION FORM

Use this form for an in specie transfer of managed funds to a Powerwrap Investment Acccount.

Part 1 - Portfolio details
Account name
Account number

## Part 2 - Details of where managed funds are held

Current provider
Account number

Account name

## Part 3 - Managed fund transfer instructions

Choose a transfer option OR

## A) Transfer all managed funds to Powerwrap

B) Transfer the funds specified below to Powerwrap:

| APIR code Managed fund name |  | Units |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |
|  |  |  |

## Part 4 - Authorised signatures

I/we authorise the above transaction/s to be executed as instructed.

Signature of account holder 1
Date
Name
Capacity (eg. Individual/ director/ authorised signatory)

Signature of account holder 2
Date
Name
Capacity (eg. Individual/ director/ authorised signatory)

## Part 5 - Important information

Please note that, if signing this form under Power of Attorney, you verify that at the time of signing, that the POA is valid and not revoked. Please also submit a certified copy of the POA documents with this completed form.

Return this completed form and supporting documents to your Financial Adviser or Nominated Adviser Representative. Alternatively, return to us by post to: Powerwrap Client Services, PO Box 16071, Collins St West VIC 8007

This form to be used in respect of Powerwrap Investment Account ARSN 137053073 issued by Powerwrap Limited ("Responsible Entity", "Powerwrap") ABN 67129756850 AFSL 329829

