

# Redemption Form



Use this Redemption Form to make a request to redeem all or part of your investment in the Uniting Financial Services Ethical Diversified Fund ("EDF"). Currently, there is no minimum redemption amount.

Notably, a minimum investment balance of \$250,000 is required to maintain your investment in the EDF - if a redemption request results in a balance of less than \$250,000, you may be required to redeem all of your units in the EDF.

Prior to making a decision to redeem all or part of your investment in the EDF, you should carefully consider the terms of the EDF Information Document.



You can send your completed Withdrawal Form by fax to:  
**Uniting Financial Services**  
**C/- RBC Investor Services Trust**  
**Fax: 02 8262 5492**



Or post to:  
**Uniting Financial Services**  
**C/- RBC Investor Services Trust**  
**GPO Box 4471, Sydney NSW 2001**



## Helpful hints for completing this application

- Please complete this form using a **BLACK OR BLUE PEN** and print well within the boxes in **BLOCK LETTERS**. Mark appropriate boxes with X



## Need help or have a question?

Call us on **1300 133 673**

Visit us at [unitingfinancial.com.au](http://unitingfinancial.com.au)

Email us at [contactus@unitingfinancial.com.au](mailto:contactus@unitingfinancial.com.au)

Please use **BLOCK LETTERS** in **BLACK OR BLUE PEN ONLY** and  tick required choices

## INVESTOR DETAILS

Client code

Account number

## REDEMPTION DETAILS

Please refer to the Ethical Diversified Fund Information Document before completing this section. In extraordinary circumstances, withdrawals could be restricted.

### I/we wish to withdraw:

No. of units:

OR

Amount (in Australian dollars) \$

, , . 

OR

Entire investment in the fund

Investor 1 name

Phone number during business hours

Email address

Investor 2 name

Phone number during business hours

Email address

## PAYMENT DETAILS

Note: redemption payments will be paid into Australian bank accounts only that are in the name(s) of the investor(s) only, not to overseas or third party accounts.

### I/we elect to receive payment by direct deposit into my/our following account(s):

Account name:

Name of bank:

BSB:

Account number:

OR

my/our Australian bank account recorded on the registry

**DECLARATION AND INVESTORS SIGNATURES****By signing this Redemption Form, I/we:**

- declare that all the details given in this Redemption Form are true and correct;
- acknowledge that if this Redemption Form is unclear or incomplete, the Trustee will not complete my/our request until further instructions are received;
- take full responsibility for the decision to redeem my/our investment from the EDF; and
- hereby release, indemnify and discharge the Trustee and its agents from any action arising from the loss, misplacement or misapplication of funds resulting from the collection of funds redeemed, the dispatch of cheques representing proceeds of redemption or transfer of and proceeds into a financial institution account, the making of this redemption request by an authorised person of the unitholder and the use or misuse of the proceeds of redemption.

Company seal (if applicable)

**For an investment held individually:**

- the investor must sign and date the declaration in the space provided.

**For an investment held jointly:**

- all investors must sign and date the declaration in the space provided.

**Signed under Power of Attorney:**

- Attorneys must attach a certified copy of the Power of Attorney. The Attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her Power of Attorney and is also authorised to sign this form.
- If the Power of Attorney was established outside of NSW, we will also require the Power of Attorney document to be certified by a legal practitioner who practices in your state.

**On behalf of a Corporation:**

This Redemption Form must be executed by one of the following methods:

- by signature of 2 directors or 1 director and the company secretary;
- signature of the sole director and company secretary for sole director proprietary companies; or
- under power of attorney

Name

Date

 /  / 
 Director     Sole director

Signature

**(Important: Companies and corporate trustees must cross here)**

Name

Date

 /  / 
 Director     Sole director

Signature

**(Important: Companies and corporate trustees must cross here)**