PLEASE SEND COMPLETED FORM TO:

By Email: smallco@smallco.com.au

By Fax: (02) 8256 1010

By Post: GPO Box 4564, Sydney NSW 2001

Further Information: T: (02) 8256 1000 E: <u>smallco@smallco.com.au</u>



SMALLCO INVESTMENT FUND (ASC0001AU)

Additional Application Form

Section 1: Investo	r Details		
Investor Name:			
Investor Number:			
NOTE: investment ins	structions received before 4.00pm Sydney	time will be processed on	the same business day.
Section 2: Target	Market		
To assist Smallco in r	neeting its regulatory obligations, please c	omplete this section.	
2.1 Have you received personal financial advice in relation to the Fund?		 intended for use as a satellite/minor allocation using the product as a growth component within a diversified portfolio with a minimum investment timeframe of at least 5 years who has at least a high risk return profile who only need access to capital within one week (or more) of requesting a withdrawal in normal market conditions For full details of the Target Market Determination (TMD), please visit www.smallco.com.au Are your investment objectives in line with those of the Fund? Yes, proceed to section 3 No. Unfortunately, we are unable to accept the application. 	
Yes, proceed to section 3			
No, continue to section 2.2			
2.2 Please read the brief Target Market Description below. Investment in the Fund is subject to investment risk, which may include possible delays in repayment and loss of income and principle invested. The Fund is not suitable for investors that seek capital preservation, or income distribution. The Fund is likely to be appropriate for an investor: Section 3: Investment Details			
\$		Financial Institution:	ANZ
		BSB:	012 003
Payment method, either: (Tick to indicate how your application monies will be transferred)		Account number:	835 525 294
		Account name:	Smallco Investment Fund
BPAY:		Reference:	<investor number=""></investor>
Biller Code:	344234		
Reference number:	For investor specific reference number contact us on (02) 8256 1000 or smallco@smallco.com.au	☐ Cheque: Payable to <smallco fund="" investment=""> <i>Please post the cheque and this application form to:</i> <i>GPO Box 4564, Sydney NSW 2001</i></smallco>	
Section 4: Authoris	ation		
	ve have read and understood the latest Produce clarations and statements provided in connection		

Please ensure that this form is signed according to the authority assigned to the account.

Signature		Signature	
Print Name		Print Name	
Title (circle)	Individual / Sole Director/ Director/ Trustee	Title (circle)	Individual / Sole Director/ Director/ Trustee
Date		Date	