

Company or Trust in which Investment is Held

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Full Name(s)  
of Registered  
Holding


Registered  
Address


Post Code

You are required to insert this number

Securityholder Reference Number (SRN)

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## Register Removal Request

Use a black pen. Print in CAPITAL letters inside the boxes

### A Request for Removal of Securities

Description of Securities  
(Shares, Options etc)

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Number of Securities  
to be Removed

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I/we request the securities described above to be removed

From the

--

Register

To the

--

Register

Contact Name

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Telephone Number - Business Hours

( )
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Telephone Number - After Hours

( )
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### B Sign Here – This section must be signed for your instructions to be executed

I/We authorise you to act in accordance with my/our instructions set out above. I/We acknowledge that these instructions supersede and have priority over all previous instructions relating to removal or register for the above holding.

Individual or Securityholder 1

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Director

Securityholder 2

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Director/Company Secretary

Securityholder 3

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Sole Director and  
Sole Company Secretary

Day Month Year

/	/	
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**Individual:** This form is to be signed by the securityholder.

**Joint Holding:** Where the holding is in more than one name, all of the securityholders must sign.

**Power of Attorney:** To sign as Power of Attorney, you must have already lodged it with the registry. Alternatively, attach a certified photocopy of the Power of Attorney to this form.

**Companies:** Director, Company Secretary, Sole Director and Sole Company Secretary can sign. Please indicate the office held by signing in the appropriate space.