



Guide to completing this form

Please complete the form using a BLACK PEN and print well within the boxes in BLOCK LETTERS. Mark appropriate boxes with an 🗙

| Post completed withdrawal form to: | Or fax completed withdrawal form to:"" |
|--|--|
| Melbourne Securities Corporation Limited | Melbourne Securities Corporation Limited |
| C/- Citi Unit Registry Australia | C/- Citi Unit Registry Australia |
| GPO Box 764 | 1300 101 688 (Australia Investors) |
| Melbourne VIC 3001 | +61 1300 101 688 (International investors) |

The minimum withdrawal amount from the Fund is \$5,000 (Class A) unless the entire investment is withdrawn. To remain invested in the Fund your minimum investment balance at any point must be at least \$20,000 (Class A). Investments in Class P and Class Z may have separate arrangements.

If you have any questions, please contact our Client Service team on 1800 636 888 (Australian investors) or +61396124646 (if calling from outside Australia) or send an email to clientservice@sghiscock.com.au

| Part 1 | Investor details |
|---|--|
| Investor number | |
| Part 2 | Withdrawal details (Please refer to the relevant Product Disclosure Statement (PDS) before completing this section) |
| I/we wish to withdraw: | |
| No. of units | OR |
| Amount (in Australian dollars) | \$ OR |
| Entire investment in the Fund | |
| Name of Fund | |
| Investor 1 name | |
| Phone number (during business hours) | Email address |
| Investor 2 name | |
| Phone number (during business hours) | Email address |
| Part 3 | Payment details (Note: Withdrawal payments will not be paid to third parties) |
| I/we elect to receive payment by direct deposit into: my/our following Australian bank account (we are unable to transfer to overseas bank accounts) | |
| Account name | |
| Name of bank | |
| BSB | Account number |
| OR | my/our Australian or New Zealand ¹ bank account recorded on the Melbourne Securities Corporation Ltd registry |

 1 New Zealand bank accounts can only be used by unitholders invested in Funds offered in New Zealand.

abrdn.com

Withdrawal Form

| Part 4 | Signatures |
|--|-------------------|
| If this form is signed un originally certified cop | |
| Signature > | |
| Name | |
| Director | Sole director |
| Date (DD/MM/YY) | |
| Signature > | |
| Name | |
| Director | Company Secretary |
| Date (DD/MM/YY) | |
| | |
| | |