

Additional Investment Form

INVESTMENT DETAILS				
Investor Number:				
Investor Name:				
Contact number:				
APPLICATION DETAILS				
Fund Name:				
Investment Amount:				
A minimum transaction amount may be applicable for this Fund. Please refer to the PDS for more information.				
Any application for amounts below the minimum requirement will not be accepted and a return of monies may incur a cost for the investor.				
ayment method				
Direct credit – pay to:				
Financial institution name and branch location	National Australia Bank			
3SB number	082 401			
Account number	35 216 8413			
Swift/BIC	NATAAU3303M			
Account name	EQUITY TRUSTEES LIMITED ATF GCQ FLAGSHIP FUND APPLICATION ACCOUNT			
Reference	<investor name=""></investor>			
DECLARATION AND SIGNATURE Please sign this form below. This form must be signed as per the current signing instructions that we have on record. If signed under power of attorney, the attorney certifies that he/she has not received notice of revocation of the power of attorney. Please include a certified copy of the power of attorney, if it has not been previously provided, to Apex Fund Services Pty Ltd.				
Signature 1			Signature 2	
Name:			Name:	
Title:			Title:	
Signature:			Signature:	
Date:			Date:	

Please return completed forms to Apex Fund Services via email.

Email: registry@apexgroup.com

If you require further assistance, please do not hesitate to contact Apex Fund Services on 1300 133 451