

CHANGE OF DETAILS FORM

Online Form: Change of details requests can also be lodged via the online [Investor Portal](#).

Return the completed form to:

Post:

Langdon Equity Partners Ltd
c/- Citi Unit Registry Australia
GPO Box 764
Melbourne VIC 3001

Fax:

[Fund Name] [Investor Name]
c/- Citi Unit Registry Australia
+61 1300 102 151

FUND AND INVESTOR INFORMATION

Please accept this Change of Details request with respect to my/our investment in the below Fund(s):

Langdon Global Smaller Companies Fund

Investor number (eight-digit number): _____

Investor Name: _____

UPDATE CONTACT DETAILS

Email Address:

Registered Address:

Postal Address:

Mobile Phone Number:

Home Phone Number:

Work Phone Number:

Fax Number:

UPDATE AN ACCOUNT OPERATING AUTHORITY

Please indicate how you wish to operate your Account.

Any one of us to sign, or

All of us to sign, or

Any two of us to sign

If you select 'any one of us to sign' each of you (including any person you appoint as an authorised representative) will be able to transact on, or otherwise operate your account independently of the others.

UPDATE BANK ACCOUNT DETAILS

Note: We cannot transfer proceeds to third party bank accounts. Nominated bank account name must be in the same name as the investor(s). For trusts or super funds, the bank account must be in the name of the trust/super fund or refer to the name of the trust/super fund e.g. 'ABC Super Fund' or 'ABC Pty Ltd ATF ABC Super Fund'.

Bank account details for **distributions**

Bank _____
Account Name _____
BSB No _____ Account No _____

Bank account details for **withdrawals** if different from above

Bank _____
Account Name _____
BSB No _____ Account No _____

UPDATE DISTRIBUTION ELECTION

I/we wish to have my distributions:

- reinvested as additional units in the Fund(s); or
 paid in cash (Australian dollars only) into my/our bank account below:

Bank _____
Account Name _____
BSB No _____ Account No _____

Note: We can not transfer proceeds to third party bank accounts. Nominated bank account name must be in the same name as the investor(s). For trusts or super funds, the bank account must be in the name of the trust/super fund or refer to the name of the trust/super fund e.g. 'ABC Super Fund' or 'ABC Pty Ltd ATF ABC Super Fund'.

UPDATE FINANCIAL ADVISER DETAILS / ACCESS

By filling in this section, you consent to give your financial adviser access to your statements (including via email). Advisers will only be copied in on your transaction statements, investor communication and Annual Financial Reports.

Adviser Name _____
Name of Advisory Firm and/ or Dealer Group _____
AFSL Number _____ Adviser Number _____
Address _____
Suburb _____ State _____ Postcode _____
Home Phone Number (_____) _____ Fax Number (_____) _____
Mobile Number _____
E-mail address _____

PROVIDE YOUR TAX FILE NUMBER(S)

Tax File Number 1

Full Name: _____ TFN: _____

Tax File Number 2

Full Name: _____ TFN: _____

Note: For trusts and superannuation funds – provide the TFN of the trust or super fund. TFNs for trustees cannot be accepted.

SIGNATURE(S)

All signature(s) on this form must match the signing authority currently held by the Registry for your investment account.

Signatory 1

Signature: _____

Full Name: _____

Capacity: (e.g. director, trustee) _____

Date ____/____/____

Signatory 2

Signature: _____

Full Name: _____

Capacity: (e.g. director, trustee) _____

Date ____/____/____

Signatory 3

Signature: _____

Full Name: _____

Capacity: (e.g. director, trustee) _____

Date ____/____/____

Signatory 4

Signature: _____

Full Name: _____

Capacity: (e.g. director, trustee) _____

Date ____/____/____