

## Please return completed form via post to:

T. Rowe Price Australia Limited Unit Registry C/ Link Market Services Limited Locked Bag 5038 Parramatta NSW 2124

or via fax: +61 2 9287 0375

## **Change of Financial Adviser**

Please complete this form if you have changed your financial adviser, wish to add a new financial adviser or remove your current financial adviser from your account.

Investor number	
Account name	
Telephone number (business hours)	
A. Current financial adviser details	
Please enter the details below of your financial adviser who we currently hold on file. If you don't have a cradviser, please go to Section B.	urrent
Name of current financial adviser	
Company or organisation name	
Postal address	
Postcode	
Dealer group	
Delete the financial adviser indicated above and do not replace with another adviser. Please go to S	Section C.
Delete and replace with the financial adviser details in Section B	

## B. New financial adviser details

I wish my financial adviser to receive information about my investments. By entering my financial adviser details below, I acknowledge and agree that they will have online access to information about my investment.  Name of new financial adviser  Dealer group  AFSL number (if known)  Practice office name  Registered address  Registered address  Postcode  Business number (include area code)  Fax number  Mobile number  Email address  Email address	Please give your consent, by ticking the appropriate box by access to information about your investments and author	
AFSL number (if known)  Practice office name  Registered address  Postcode  Business number (include area code)  Fax number  Mobile number  Email address	adviser details below, I acknowledge and agree tha	
Practice office name  Registered address  Postcode  Business number (include area code)  Fax number  Mobile number  Email address  Registered address  Postcode  Business number (include area code)  Fax number  Email address	Name of new financial adviser	Dealer group
Registered address  Postcode  Business number (include area code)  Fax number  Mobile number  Email address	AFSL number (if known)	AFSL number (if known)
Postcode Business number (include area code)  Fax number  Mobile number  Email address	Practice office name	Registered address
Business number (include area code)  Business number (include area code)  Fax number  Mobile number  Email address	Registered address	
Postcode  Business number (include area code)  Fax number  Mobile number  Email address		Postcode
Business number (include area code)  Fax number  Mobile number  Email address		Business number (include area code)
Fax number  Mobile number  Email address	Postcode	
Mobile number Email address	Business number (include area code)	Fax number
Mobile number Email address		
	Fax number	Mobile number
Email address	Mobile number	Email address
Email address		
	Email address	

## C. Declaration and signature

By signing this form, I/we:

- may be required to provide additional proof of identification information for the purposes of the AML/CTF Law;
- declare that I/we have read and understood and agree to be bound by the terms and conditions of the current PDS, Reference Guide and Application Form for the relevant fund(s);
- declare that all details previously disclosed and provided in this Change of Financial Adviser form are true and correct and I/we undertake to inform you of any changes to the information supplied as and when they occur;
- (if signing under a power of attorney) declare that I/we have not received notice of revocation of that power;
- acknowledge all personal information is collected in line with Equity Trustees Limited Privacy Policy, a copy of which is available at www.eqt.com.au/insto

Investor type	Who should sign
Individual	Where the investment is in one name, the investor must sign.
Joint investors	Where the investment is in more than one name, all investors must sign or unless otherwise authorised.
Company	Two directors or a director and a company secretary, unless you are a sole director and sole company secretary or an authorised signatory previously noted by the registry.
Trust	Each trustee must sign unless otherwise authorised or, if a corporate trustee, then as for a company.
Partnership	Each partner.
Association or Registered co-operative	Each office bearer.
Government body	Relevant principal officer/authorised signatory.
Power of attorney	If signed under a power of attorney, the power of attorney must have been previously noted by the registry.

Signature 1	Signature 2	
Name	Name	
Date	Date	
Title	Title	
Investor 1 (individual) Director	Investor 2 (individual) Director	
Secretary Sole director & secretary	Secretary	
Non-corporate trustee Partner	Non-corporate trustee Partner	
Other office bearer or attorney (please specify):	Other office bearer or attorney (please specify):	
For further informa	ation	
For enquiries please call T. Rowe Price Client		
Services team on +61 2 8667 5700 between 9am and 5pm, Sydney time. For security purposes,		
telephone calls ma		

Equity Trustees Limited (ABN 46 004 031 298) AFSL 240975 is a subsidiary of EQT Holdings Limited (ABN 22 607 797 615), a publicly listed company on the Australian Securities Exchange (ASX: EQT) and is the Responsible Entity and issuer of units for the Funds.

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