

This form should be used to make an additional investment.

Please complete the relevant sections in BLOCK letters

**Proceeds from deposits will not be available until the funds are cleared.**

**Returning this form**

You should return this form either by post or email.

**Mail:**

Hamilton Asset Management Limited  
 PO BOX 402  
 HAMILTON NSW 2303

**Email:**

investor\_services@reespritchard.com.au

**More information:**

Telephone 02 4920 2877

**1. Investor details (must be completed)**

Investor number	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>																				
Investor name	<input style="width: 100%; height: 20px;" type="text"/>																				

**2. Investment amount**

Amount to be invested	\$ <input style="width: 90%;" type="text"/>	The minimum investment amount is \$1,000.00
-----------------------	---	---

**3. Signatures (must be completed)**

Each signatory confirms that they have been duly authorised to execute this application on behalf of the applicant(s) and that the signing authorities specified below have also been duly authorised

Unit holder 1/ (Individual)	Joint Unit holder 2/Director 2	Joint Unit holder 3/Director 3
Name	Name	Name
Signature	Signature	Signature
If a company, your corporate title <input type="checkbox"/> Director <input type="checkbox"/> Sole Director <input type="checkbox"/> Sole director and sole secretary <input type="checkbox"/> Other, please specify below	If a company, your corporate title <input type="checkbox"/> Director <input type="checkbox"/> Secretary <input type="checkbox"/> Other, please specify below	If a company, your corporate title <input type="checkbox"/> Director <input type="checkbox"/> Secretary <input type="checkbox"/> Other, please specify below
Date	Date	Date