



# **Application Form**





| Trustee  | Fund Administrator   |
|--|--|
| Hamilton Asset Management Limited<br>Level 1/10 Murray Street, Hamilton NSW 2303 | Rees Pritchard Investor Services Pty Limited<br>Level 1/10 Murray Street , Hamilton NSW 2303 |
| +61 2 4920 2877  | +61 2 4920 2877  |
| client_services@hamiltonam.com.au  | investor_services@reespritchard.com.au   |
| www.hamiltonam.com.au  | www.reespritchard.com.au   |

#### **Important Information**

The Information Memorandums contain important information about investing in the Funds.

You must read the applicable Information Memorandum before completing this Application Form.

You can download a copy of the applicable Information Memorandum at www.hamiltonam.com.au

Terms defined in the Information Memorandums have the same meaning in the Application Form unless otherwise indicated.

You should seek professional advice before investing.

## A. How to complete the application form

You need to complete the Application Form and return it to Hamilton in order to invest in a Fund.

When you complete this form, please:

- use a black pen
- write in BLOCK LETTERS
- answer all sections
- mark answer boxes with a tick (v).
- sign the back page

If you make an error, please do not use correction fluid. Instead cross out your mistake and initial any amendments.

Cheques should be made payable to:

#### Hamilton Asset Management Limited [applicant's name]

If paying by bank cheque, please ensure that the name of the applicant is included in the name of the payee.

You must contact the Fund Administrator for instructions before investing via bank transfer.

Your completed Application Form, supporting documentation and cheque should be forwarded to:

#### **Hamilton Asset Management Limited**

PO Box 402

Hamilton

## New South Wales 2303

If sending applications by email, you accept full responsibility for any loss arising from Hamilton acting upon emailed/scanned instructions and you agree to release and indemnify Hamilton in respect of any liabilities arising from us acting on emailed/scanned instructions, even where such instructions are not genuine.

#### Who can invest in a Fund?

- individuals 18 years old and over;
- partnerships;
- companies;
- incorporated bodies (e.g. strata bodies corporate, trade unions and some social or sporting associations);
- trustees including trustees of superannuation funds, minors and deceased estates;
- registered co-operatives; and
- Government bodies,

#### who qualify as wholesale investors can invest in the funds.

A maximum of three applicants may make a single application.

#### Correct forms of registrable name(s)

Only legal entities are permitted to invest in the Fund. Applications must be made in the name(s) of natural persons, companies or other legal entities in accordance with the Corporations Act. Full name including first, middle and surname is required for each natural person. The name of the beneficial owner or any other registrable name may be included by way of an account designation if completed exactly as described in the examples of the correct forms of registrable name(s) below.

| Investor Type                   | Account Name  | Example   | Account designation                     |
|---------------------------------|---|---|---|
| Individual                      | Title, full given names and surname of the individual   | Mr John Barry Smith   | N/A                                     |
| Partnership or joint applicants | Title, full given names and surname Mr John Barry Smith and of each individual partner Robert James Jones |   | Smith, Jones & Associates               |
| Company                         | Company name  | ABCD Pty Limited  | N/A                                     |
| Incorporated body               | Name of incorporated body   | ABCD Rugby Club Inc   | N/A                                     |
| Superannuation fund             | Full name of the corporate or individual trustee(s)   | Mr John Barry Smith and Mrs<br>Jennifer Jane Smith or ABCD<br>Pty Limited | Smith Super Fund A/C                    |
| Trust                           | Full name of the trustee(s)   | Mr John Barry Smith and Mrs<br>Jennifer Jane Smith                        | Family Fund A/C                         |
| Corporate trust                 | Full name of the corporate trustee  | ABCD Pty Limited  | ABCD Staff Super Fund A/C               |
| Minor (under 18 years of age)   | Full name of the trustee(s)   | Mr John Barry Smith and Mrs<br>Jennifer Jane Smith                        | Mr Gary James Smith (name of the minor) |
| Deceased Estate                 | Full name(s) of the executor(s) of the estate   | Mr John Barry Smith and Mrs<br>Jennifer Jane Smith                        | Estate of Mildred Agnes Jones           |

#### Address

There is a space for you to complete your address on the application form.

Hamilton is also required to collect your residential address. We cannot accept a PO Box, without you providing your current residential or registered address.

If your mailing address is care of a third party such as your adviser, please be aware that all correspondence will be sent to this address

#### Who should sign?

All individual(s) in whose name the investment is held should sign. Joint applicants will be deemed to be holding Units as joint tenants. An application from a company, incorporated association or body corporate must be signed:

- by two officers (e.g. two directors or a director and secretary);
- as required by the constitution or rules of the company or body (e.g. under seal witnessed by two officers); or
- by one director for a single director company.

Additional documentation may also be required for applications in the name of a company, incorporated association or body. Please see section B for further details.

#### Signing under Power of Attorney

If you are signing under a power of attorney, please provide an original certified copy of identification (e.g. driver's licence) for each attorney together with an original certified copy of the power of attorney and specimen signature(s) of the attorney(s) if not displayed in the document.

#### Opening an account for a minor

If you are opening an account on behalf of a minor (i.e. acting as trustee) you are required to quote your Tax File Number (TFN) or exemption category so that withholding tax is not deducted from your investment income.

If you are making an investment on behalf of a minor or another entity, you are required to provide supporting documentation. Please contact the Fund Administrator for further details.

#### What if not all sections are completed?

Hamilton will endeavour to open your account as soon as possible. In some circumstances, where questions are not answered, Hamilton will not be able to open your account until the missing information is provided. If Hamilton does not receive completed documentation within 30 days, your money will be returned. If your application form is incomplete and does not allow Hamilton to fulfil its AML/CTF legal obligations described below, the processing of your application may not proceed until it has been completed in full.

#### Financial advisers' stamps

If a licensed or appropriately authorised financial adviser's stamp appears on the application form, Hamilton will supply them with information about your investment unless you instruct Hamilton not to do so.

# Anti-Money Laundering (AML) / Counter Terrorism Financing (CTF) and Identification forms

As part of Hamilton's commitment to Australian and international AML/CTF standards, Hamilton will fulfil its legal obligations as required. This includes collecting additional information from investors to facilitate compliance with AML/CTF laws.

#### **Identification forms**

Investors must provide Identification and verification that relates to the type of account they are opening and the type of investor they are. The identification forms you need to provide per account type are listed in section B of this form.

In certain circumstances Hamilton may be required for you to submit additional Identification than listed in section A.

#### When do I need to provide an Identification Verification Form?

You must supply Identification unless you have already supplied an Identification Form to Hamilton.

Identification is also required for each individual who is an authorised third party signatory on your account.

#### Why do I need to provide identification?

The Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) requires the collection and verification of specific information from clients.

# Anti-Money Laundering and Counter-Terrorism Financing Act 2006 – terms and conditions

- (a) You must not knowingly do anything to put Hamilton in breach of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth), Anti-Money Laundering and Counter-Terrorism Financing Rules Instrument 2007 (No.1) or any other subordinate instruments (AML/CTF Laws). You agree to notify Hamilton if you are aware of (or become aware of) anything that would put Hamilton in breach of the AML/CTF Laws.
- (b) You agree to provide additional information and assistance to us on request, and to comply with all reasonable requests to facilitate Hamilton's compliance with the AML/CTF Laws and equivalent laws in overseas jurisdictions.
- (c) You represent and warrant that you have no reason to suspect:
  - that the money used to fund your investment is derived from or related to money laundering, terrorism financing or similar illegal activities; or
  - that any proceeds of your investment in the Fund will fund illegal activities.
- (d) Hamilton is subject to the AML/CTF Laws. In making an application on these terms and conditions, you consent to Hamilton disclosing, in connection with the AML/CTF Laws, any of your personal information (as defined in the *Privacy Act* 1988 (Cth)) and acknowledge and agree that Hamilton may be prohibited (under the AML/CTF Laws) from telling you that any such disclosure has been made.
- (e) In certain circumstances Hamilton may be obliged to freeze or block your account where it is used in connection with illegal activities or suspected illegal activities. Freezing or blocking can arise as a result of the account monitoring that is required by the AML/CTF Laws. If your account is frozen or blocked, Hamilton is not liable to you for any consequences or losses whatsoever and you agree to indemnify Hamilton in respect of any liability to a third party in connection with the freezing or blocking of your account.
- (f) Hamilton may, in its absolute discretion, delay, and block or freeze any transactions in respect of your investment or redeem any Units issued to you if it believes doing so is necessary to comply with the AML/CTF Laws. In these circumstances, Hamilton will not be liable to you for any resulting loss.

Hamilton retains the right not to provide services or issue products to any applicant. This means that Hamilton may, in its absolute discretion, not issue Units to you.

#### **Tax File Numbers**

Supply of any Tax File Number ("TFN") is discretionary. It is not an offence if you decide not to supply your TFN. If you do not supply your TFN, however, tax will be deducted from your income earned at the highest marginal tax rate (plus Medicare levy) and forwarded to the Australian Taxation Office. These deductions will appear on your statements.

# B. Application form checklist

Please follow the checklist below and complete all sections of the Application Form from for the specific type of account you wish to open

| Client type                                       | Sections to be completed  | Whose name must the account be in | Who signs   | Documentation required for ID verification  |
|---|---|-----------------------------------|---|---|
| Individual  | Must complete  1a. Applicant 1 details  2 Mailing address  3. Distribution and withdrawal details  4. Investment information  5. Wholesale client certification  9. Applicants signature  If applicable complete  1f. Other account designations  6. Appointment of Financial Adviser  E. Qualified accountants certificate   | The individual                    | The individual  | □ an original or certified copy of an Australian state or territory driver's licence containing a photograph of the signatory; or □ a certified copy of a card issued by a state or territory for the purpose of proving a person's age, containing a photograph of the person. If you cannot provide one of the above documents, additional information may be requested prior to the account being opened                   |
| Joint applicants and partnership                  | Must complete  1a. Applicant 1 details, and  1b. Applicant 2 details; and/or  1c. Applicant 3 details.  2 Mailing address  3. Distribution and withdrawal details  4. Investment information  5. Wholesale client certification  7. Account operating instructions  9. Applicants signature  If applicable complete  1f. Other account designations  6. Appointment of Financial Adviser  E. Qualified accountants certificate                                    | All of the applicants             | Each applicant  | For each applicant  an original or certified copy of an Australian state or territory driver's licence containing a photograph of the signatory; or  a certified copy of a card issued by a state or territory for the purpose of proving a person's age, containing a photograph of the person.  If you cannot provide one of the above documents, additional information may be requested prior to the account being opened |
| Company   | Must complete  1a. Applicant 1 details; and  1b. Applicant 2 details; and/or  1c. Applicant 3 details.  1d. Company and corporate details  2 Mailing address  3. Distribution and withdrawal details  4. Investment information  5. Wholesale client certification  7. Account operating instructions  9. Applicants signature  If applicable complete  1f. Other account designations  5. Appointment of Financial Adviser  E. Qualified accountants certificate | The company                       | □ Two officers (e.g. two directors or a director and secretary); or □ as required by the constitution / rules of the company; or □ one director (for a sole director company) | □ Certified copy of the certificate of incorporation or registration.  For each director: □ an original or certified copy of an Australian state or territory drivers licence containing a photograph of the director; or □ a certified copy of a card issued by a state or territory for the purpose of proving a person's age, containing a photograph of the director  |
| Superannuation funds, trusts and deceased estates | Must complete either  1a. Applicant 1 details; and  1b. Applicant 2 details; and/or  1c. Applicant 3 details.  1e. Trust and superannuation fund details  2 Mailing address   | The trustee(s) of the trust       | Each trustee or executor (see above if the trustee is a company)  | □ certified copy of the trust deed  For each individual trustee: □ an original or certified copy of an  Australian state or territory driver's licence containing a photograph of the  trustee; or  |

| Client type              | Sections to be completed   | Whose name must the account be in | Who signs             | Documentation required for ID verification   |
|--------------------------|--|-----------------------------------|-----------------------|--|
|                          | □ 3. Distribution and withdrawal details □ 4. Investment information □ 5. Wholesale client certification □ 7. Account operating instructions □ 9. Applicants signature If applicable complete □ 1d. Company and corporate details and □ 5. Appointment of Financial Adviser E. Qualified accountants certificate |                                   |                       | □ a certified copy of a card issued by a state or territory for the purpose of proving a person's age, containing a photograph of the trustee  For a corporate trustee: □ Certified copy of the certificate of incorporation or registration.  For each director of the corporate trustee: □ an original or certified copy of an Australian state or territory driver's licence containing a photograph of the trustee; or □ a certified copy of a card issued by a state or territory for the purpose of proving a person's age, containing a photograph of the trustee □ (For deceased estates) Certified copy of the will and certificate of probate or letters of administration.  For each executor of the deceased estate: □ an original or certified copy of an Australian state or territory driver's licence containing a photograph of the trustee; or □ a certified copy of a card issued by a state or territory for the purpose of proving a person's age, containing a photograph of the trustee |
| Other documents required | If you are unable to provide any of the above do documents.  | cumentation you should cor        | ntact Hamilton for de | etails of acceptable alternative identification  |

#### C. Certification of documents

#### What is a certified copy?

A certified copy of a document is a copy that has been certified as a true and accurate copy by one of the persons listed below.

The certified document must be a clear copy of the original. A photograph should be clear and easy to see.

#### Acceptable certifications

The person certifying the document should write the following statement on the document:

I certify that I have seen the original documentation and that this copy is a complete and accurate copy of that original.

Below the statement the certifier should sign and date the document and also write or include the following information:

- 1. Their full name in block letters.
- Their capacity (e.g.; CPA, JP, Police Officer, etc) and their registered number.
- Where applicable, an official stamp, seal or identification number of certification.

The certification should not be more than three months old.

#### Offshore certification

Individuals and companies based offshore who cannot have documents certified by an Australian person as listed below can have their documents certified by the international equivalent of such a person.

However, where the applicant is based in a jurisdiction of extreme or high risk, Hamilton may request additional information and identification to ensure it is reasonably satisfied that an applicant is the person who they claim to be.

#### Persons who can certify copies of documents for you

- An officer with, or authorised representative of, a holder of an Australian Financial Services Licence (AFSL), having two or more continuous years of service with one or more licensees.
- A finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993).
- An officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993).
- A permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public.
- An agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public.
- A justice of the peace.
- A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described).
- A judge of a court.
- A magistrate.
- A chief executive officer of a Commonwealth court.
- A registrar or deputy registrar of a court.
- An Australian police officer.
- An Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955).
- A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with two or more years of continuous membership.

A notary public officer (for the purposes of the *Statutory Declaration Regulations* 1993).

## D. Application form

This Application Form may be used for:

| Fund name                            | ABN            | Unit class       | Information Memorandum issue date |
|--------------------------------------|----------------|------------------|-----------------------------------|
| Hamilton Cash Management Trust       | 40 370 526 923 | Not applicable   | 1 July 2022                       |
| Newcastle Securities & General Trust | 25 536 450 339 | Investment Units | 1 July 2022                       |

#### Is this an application for a new or an existing investor?

| Existing investor(s)  |  |
|---|--|
| If you are an existing investor with Hamilton, please write your investor number here |  |

If you are an existing investor in the same fund, please complete the Additional Investment Form instead. Otherwise, complete section 1 to 9 as applicable.

#### Politically exposed persons

Any of the following investors will be "Politically Exposed Persons"

- 1) an individual who holds a prominent public position or function in a government body or an international organisation, including:
  - a) Head of State or head of a country or government; or
  - b) government minister or equivalent senior politician; or
  - c) senior government official; or
  - d) Judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge of a court of equivalent seniority in a foreign country or international organisation; or
  - e) governor of a central bank or any other position that has comparable influence to the Governor of the Reserve Bank of Australia; or
  - f) senior foreign representative, ambassador, or high commissioner; or
  - g) high-ranking member of the armed forces; or board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation; and
- 2) an individual who is an immediate family member of a person referred to in 1) above including:
  - a) a spouse; or
  - b) a de facto partner; or
  - c) a child and a child's spouse or de facto partner; or
  - d) a parent; and
- an individual who is a close associate of a person referred to in 1) above, which means any individual who is known (having regard to information that is public or readily available) to have:
  - a) joint beneficial ownership of a legal entity or legal arrangement with a person referred to in 1) above; or
  - b) sole beneficial ownership of a legal entity or legal arrangement that is known to exist for the benefit of a person described in 1) above.

| 1a. Applicant 1 details (all applicants must complete this section) |   |                      |   |   |  |
|---|---|----------------------|---|---|--|
| Investor type   |   |                      |   |   |  |
| □ Individual □ Joint applicant                                      | director, complete section(s) 1b more than one director |                      | director, complete<br>d 1c.) Trustee<br>t also complete | □ Individual trustee must also complete section 1e. |  |
| Please indicate if you are a Politically                            | Exposed Person:   |                      |   |   |  |
| □ No  |   | ☐ Yes – please       | provide details of offi                                 | ce or role below                                    |  |
| Office/role held:   |   |                      |   |   |  |
|   |   |                      |   |   |  |
| Title Full given name(s)  |   |                      |   |   |  |
| Surname   |   |                      |   | Date of birth – <i>dd/mm/yyyy</i>                   |  |
| Occupation  |   | Employer             |   |   |  |
| Residential address (must be a street                               | address; post office boxes are NOT acc                  | eptable)             |   |   |  |
| Suburb/Town/City  | State   | Postcode             |   | Country   |  |
|   |   |                      |   |   |  |
| Business telephone  | Home telephone  | Mobile telephor      | ne  | Facsimile number                                    |  |
| ( )   | ( )   |                      |   | ( )   |  |
| Email address   |   |                      |   |   |  |
| Tax file number   |   |                      | Exemption details                                       |   |  |
| Are you a citizen or tax resident of a                              | country other than Australia:                           |                      |   |   |  |
| □ No  | ☐ Yes – Country of residence                            |                      |   |   |  |
|   | You will need to complete FATCA/CR                      | S Self-Certification | n Form  |   |  |

| 1b. Applicant 2 details (if there is no second applicant, proceed to 1d. |  |   |  |  |  |
|--|--|---|--|--|--|
| Investor type  |  |   |  |  |  |
| □ Joint applicant.   | □ Second company director.  Companies must also complete section 1d. | ☐ Second director of trustee company  Trustee companies must also complete sections1d and 1e. | ☐ Second individual trustee must also complete section 1e. |  |  |
| Please indicate if you are a Politicall                                  | y Exposed Person:  |   |  |  |  |
| □ No   |  | ☐ Yes – please provide details of off   | ice or role below  |  |  |
| Office/role held:  |  |   |  |  |  |
|  |  |   |  |  |  |
| Title Full given name  | (s)  |   |  |  |  |
| Surname  |  |   | Date of birth – <b>dd/mm/yyyy</b>                          |  |  |
| Occupation   |  | Employer  |  |  |  |
|  |  |   |  |  |  |
| Residential address (must be a stree                                     | t address; post office boxes are NOT acc                             | ceptable)   |  |  |  |
| Suburb/Town/City   | State  | Postcode  | Country  |  |  |
|  |  |   |  |  |  |
| Business telephone   | Home telephone   | Mobile telephone  | Facsimile number   |  |  |
| ( )  | ( )  |   | ( )  |  |  |
| Email address  |  |   |  |  |  |
| Tax file number  |  | Exemption details   |  |  |  |
| Are you a citizen or tax resident of a country other than Australia:     |  |   |  |  |  |
| □ No   | ☐ Yes – Country of residence   |   |  |  |  |
|  | You will need to complete FATCA/CR                                   | S Self-Certification Form   |  |  |  |

| 1c. Applicant 3 details (if there is no other applicant, please proceed to 1d) |  |  |   |  |  |
|--|--|--|---|--|--|
| Investor Type  |  |  |   |  |  |
| □ Joint applicant  | □ Third company director  Companies must also complete section 1d. | ☐ Third director of trustee company  Trustee companies must also complete sections1d and 1e. | ☐ Third individual trustee must also complete section 1e. |  |  |
| Please indicate if you are a Politically                                       | Exposed Person:  |  |   |  |  |
| □ No   |  | ☐ Yes – please provide details of o  | office or role below                                      |  |  |
| Office/role held:  |  |  |   |  |  |
| Title Full given name(s  | ;)   |  |   |  |  |
| Surname  |  |  | Date of birth – dd/mm/yyyy                                |  |  |
| Occupation   |  | Employer   |   |  |  |
|  |  |  |   |  |  |
| Residential address (must be a street  | address; post office boxes are NOT acc                             | eptable)   |   |  |  |
| Suburb/Town/City   | State  | Postcode   | Country   |  |  |
|  |  |  |   |  |  |
| Business telephone   | Home telephone   | Mobile telephone   | Facsimile number  |  |  |
| ( )  | ( )  |  | ( )   |  |  |
| Email address  |  |  |   |  |  |
| Tax file number  |  | Exemption details  | Exemption details   |  |  |
| Are you a citizen or tax resident of a country other than Australia:           |  |  |   |  |  |
| □ No   | ☐ Yes – Country of residence                                       |  |   |  |  |
|  | You will need to complete FATCA/CR                                 | S Self-Certification Form  |   |  |  |

| 1d. Company and corporate details  | 1d. Company and corporate details |                              |  |         |   |  |
|--|-----------------------------------|------------------------------|--|---------|---|--|
| Company type   |                                   |                              |  |         |   |  |
| □ Australian registered company  | □ Australian<br>company           | ;                            | □ Australian registered incorporated association/cooperative. Additional information may be requested prior to the account being opened. |         | □ Other bodies and overseas registered companies. Additional information may be requested prior to the account being opened |  |
| □ Private/proprietary  | □ Public com                      | pany                         | □ Listed company   |         | □ Majority owned subsidiary of a listed company   |  |
| Registered company name  |                                   |                              |  |         |   |  |
| ACN/ARBN   |                                   | ABN                          |  | Company | y tax file number   |  |
| Are incorporated or registered in a c  | country or tax                    | resident of a country oth    | er than Australia:   |         |   |  |
| □ No   | ☐ Yes – Co                        | ☐ Yes – Country of residence |  |         |   |  |
|  | You will nee                      | ed to complete FATCA/CF      | RS Self-Certification Form   |         |   |  |
|  |                                   |                              |  |         |   |  |
| Registered office address: street nur  | mber and nam                      | e (post office box is NOT    | acceptable)  |         |   |  |
| Suburb/Town/City   | State                             |                              | Postcode   |         | Country   |  |
| Principal place of business: street nu   | ımber and nar                     | ne (post office box is NO    | acceptable)  |         |   |  |
| Suburb/Town/City   | State                             |                              | Postcode   |         | Country   |  |
|  |                                   |                              |  |         |   |  |
| For private companies and foreign companies only, please provide details for each shareholder, who owns, through one or more shareholdings, 25% or more of the company's issued capital. |                                   |                              |  |         |   |  |
| Major Shareholder 1  |                                   |                              |  |         |   |  |
| Residential address (must be a street address; post office boxes are NOT acceptable)   |                                   |                              |  |         |   |  |
| Suburb/Town/City   | State                             |                              | Postcode   |         | Country   |  |
|  |                                   |                              |  |         |   |  |

| Residential address (must be a street address; post office boxes are NOT acceptable)  Suburb/Town/City  State  Postcode  Country |  |
|--|--|
| Suburb/Town/City State Postcode Country  |  |
|  |  |
| Major Shareholder 3  |  |
| Residential address (must be a street address; post office boxes are NOT acceptable)   |  |
| Suburb/Town/City State Postcode Country  |  |
|  |  |
| Major Shareholder 4  |  |
| Residential address (must be a street address; post office boxes are NOT acceptable)   |  |
| Suburb/Town/City State Postcode Country  |  |
|  |  |
| For private companies and foreign companies only, how many directors are there?  |  |
| For private companies and foreign companies only, please provide details for each director:                                      |  |
| Title Full given name(s) Surname   |  |

If there are more than four directors, please provide details on a separate sheet and attach it with your Application Form.

| 1e. Trust and superannuation fund details   |   |                              |               |                                 |              |   |  |
|---|---|------------------------------|---------------|---------------------------------|--------------|---|--|
| Name of trust or supera   | Name of trust or superannuation fund          |                              |               |                                 |              |   |  |
| Country of establishmer   | nt  |                              |               |                                 |              |   |  |
| Trust/superannuation fu   | und ABN <i>(if app</i> i                      | licable)                     | Trust/super   | annuation fund tax file numbe   | er           |   |  |
| Was the trust establish   | ned or a tax res                              | sident of a country other t  | han Australia | :                               |              |   |  |
| □ No  |   | ☐ Yes – Country of resi      | dence         |                                 |              |   |  |
|   |   | You will need to comple      | ete FATCA/CR  | S Self-Certification Form       |              |   |  |
|   |   |                              |               |                                 |              |   |  |
| Trust type  |   |                              |               |                                 |              |   |  |
| ☐ Category A – Self-N   | lanaged Super                                 | annuation Fund               |               |                                 |              |   |  |
| ☐ Category B – Austra   | alian Registere                               | d Managed Investment Sc      | heme          |                                 |              |   |  |
|   | Australian Re                                 | egistered Scheme Number      | :             |                                 |              |   |  |
| ☐ Category C – Gover  | nment Supera                                  | nnuation Fund                |               |                                 |              |   |  |
|   |   | ist (subject to the regulate |               |                                 | or Territory | statutory regulator such as an approved |  |
|   | Name of regulator                             |                              |               |                                 |              |   |  |
|   | Trust's ABN or registration/licencing details |                              |               |                                 |              |   |  |
| ☐ Category E – Other (e.g. family trust, unregistered scheme, foreign trust) – please specify below and complete 'Settlor Details'. |   |                              |               |                                 |              |   |  |
| Settlor details   |   |                              |               |                                 |              |   |  |
| Did the settlor(s) of the   | e Trust settle \$                             | 10,000 or more on establ     | ishment of th | ne Trust? (refer to the trust o | deed)        |   |  |
| ☐ Yes – please ☐ No provide details of the Settlor below  |   |                              |               |                                 |              |   |  |
| Title   | Full given name(s)                            |                              |               |                                 |              |   |  |
| Surname   | rname Date of birth – dd/mm/yyyy              |                              |               |                                 |              |   |  |
| Residential address (m  | ust be a street                               | address; post office boxe    | s are NOT ac  | ceptable)                       |              |   |  |
| Suburb/Town/City  |   | State                        |               | Postcode                        |              | Country                                 |  |

# Identification documentation required for a Category B trust A certified copy of an ASIC search of the scheme. Identification documentation required for a Category C trust the name of the Act which regulates the trust and a certified copy of an extract of the establishing legislation. Identification documentation required for a Category A, Category D trust and Category E trust A certified copy or certified extract of the trust deed; or Notice (such as an assessment notice) issued to the trust by the Australian Taxation Office within the preceding 12 months. If you selected Category E, you will need to provide details of beneficiaries below. **Beneficiary details** Do the terms of the Trust identify the beneficiaries by reference to a membership of a class? ☐ Yes – Provide details of membership class (e.g. family members of a named person) ☐ No – List full names of all company and individual beneficiaries Beneficiary 1 - Full name Beneficiary 2 - Full name Beneficiary 3 - Full name Beneficiary 4 – Full name If there are more than four beneficiaries, please provide details on a separate sheet and attach it with your Application Form. 1f. Other account designation.

| 2. Mailing address  |                             |                           |                      |                 |                        |                 |
|---|-----------------------------|---------------------------|----------------------|-----------------|------------------------|-----------------|
| This is the address to which all corre  | spondence in respect of the | ne investment will be sen | t.                   |                 |                        |                 |
| Contact name  |                             |                           |                      |                 |                        |                 |
| Suburb/Town/City  | State                       | Postcoo                   | e Country            |                 |                        |                 |
|   |                             |                           |                      |                 |                        |                 |
| 3. Distribution and withdrawal acco   | ount details (must be comp  | pleted)                   |                      |                 |                        |                 |
| These are the details are for the acco<br>only paid to an Australian bank acco<br>confirm that any distributions and wi<br>details rests solely on you. | unt in the name of the uni  | tholder and cannot be pa  | id by cheque or to t | hird party acco | ounts. By completing t | his section you |
| Account name  |                             |                           |                      |                 |                        |                 |
| Name of financial institution   |                             |                           |                      |                 |                        |                 |
| Branch street number and name   |                             |                           |                      |                 |                        |                 |
| Suburb/Town/City  | State                       |                           | Postcode             |                 |                        |                 |
| BSB No. —   |                             | Account<br>No.            |                      |                 |                        |                 |

| 4. Investment information (must be completed)                         | ed)                             |                    |  |  |
|---|---------------------------------|--------------------|--|--|
| What is the purpose of the investment (Select all applicable options) |                                 |                    |  |  |
| ☐ Savings   | ☐ Growth                        | ☐ Business account |  |  |
| Retirement  | □ Income                        |                    |  |  |
| ☐ Other (specify)   |                                 |                    |  |  |
|   |                                 |                    |  |  |
| Detail the source of your investment amount                           | (Select all applicable options) |                    |  |  |
| ☐ Savings   | □ Growth                        | ☐ Business account |  |  |
| Retirement  | □ Income                        |                    |  |  |
| □ Other (specify)   |                                 |                    |  |  |
|   |                                 |                    |  |  |

| Investment name                        | Minimum    | Investment amount                               | Distributio               | n options¹                        |
|--|------------|---|---------------------------|-----------------------------------|
|  | investment | (must be at least the<br>Minimum<br>investment) | Reinvest<br>distributions | Pay to my<br>nominated<br>account |
| Hamilton Cash Management Trust         | \$25,000   | \$  |                           |                                   |
| Newcastle Securities and General Trust | \$25,000   | \$  |                           |                                   |

 $<sup>^{\</sup>rm 1}\,{\rm If}$  no election is made, distribution will be automatically reinvested

# 5. Wholesale client certification

If you are investing less than \$500,000 you will need to qualify as a Wholesale Client under either Option A: Professional investor or Option B: Sophisticated investor

| Optio | n A: Professional investor   |
|-------|--|
|       | a financial services licensee  |
|       | a person who is regulated by APRA, other than a trustee of a superannuation fund, an approved deposit fund, a pooled superannuation trust or a public sector superannuation scheme   |
|       | a person registered as a body under the Financial Corporations Act 1974  |
|       | a person who is the trustee of a superannuation fund, an approved deposit fund, a pooled superannuation trust or a public sector superannuation scheme and the fund, trust or scheme has net assets of at least \$10 million   |
|       | a person that has or controls gross assets of at least \$10 million (including any assets held by an associate or under a trust that the person manages)   |
|       | a person who is a listed entity, or a related body corporate of a listed entity  |
|       | a person who is an exempt public authority   |
|       | a person who is a body corporate or an unincorporated body that carries on a business of investment in financial products, interests in land or other investments, and for the purposes invests funds received following an offer or invitation to the public where the terms of the offer provided for the funds subscribed to be invested for these purposes |

# Option B: Sophisticated investor

A certificate from a qualified accountant confirming that you have net assets of at least \$2,500,00 or have a gross income for each of the last two financial years of at least \$250,000 per year. You will need to have your accountant complete the 'Qualified Accountants Certificate' in Section E.

| 6. Appoin   | ntment o   | f Financial Adviser |  |                 |                           |  |
|-------------|--|---------------------|--|-----------------|---------------------------|--|
|             |  |                     | if you wish to appoint a financial advis |                 |                           | ess to your account and will receive copies ified in this section. |
| Financial a | adviser d  | etails              |  |                 |                           |  |
| Are you re  | egistered  | with Hamilton as a  | a financial adviser?                     |                 |                           |  |
|             | Yes – pl   | ease complete you   | ur details below                         |                 |                           |  |
|             |  | ease complete you   | r details below. You will also need to o | complete a Fina | ncial Adviser Registratio | n form available at  |
|             |  |                     |  |                 |                           |  |
| Title       |  | Full given name(s   | 5)                                       |                 | Surname                   |  |
| Financial a | adviser co   | ompany/Trading n    | ame                                      |                 | Financial adviser numl    | per  |
| Dealer gro  | Dealer group  Australian Financial Services Licence Number |                     |  |                 |                           | ervices Licence Number   |
| Street add  | dress of a   | dviser              |  |                 |                           |  |
| Suburb/To   | own/City   |                     | State                                    | Postcode        |                           | Country  |
| Business to | elephone   | 2                   | Facsimile number                         | Mobile telep    | hone                      | Adviser stamp  |
| ( )         |  |                     | ( )                                      |                 |                           |  |
| Email       |  |                     |  |                 |                           |  |
|             |  |                     |  |                 |                           |  |
|             |  |                     |  |                 |                           |  |
| 7. Accoun   | nt operat  | ing instructions    |  |                 |                           |  |
| ☐ Any ind   | lividual to  | sign                |  |                 |                           |  |
|             |  | uals to sign        |  |                 |                           |  |
| ☐ All indiv |  |                     |  |                 |                           |  |
| ☐ Other (   | please sp  | ecify):             |  |                 |                           |  |

#### 8. Declarations and acknowledgements

#### I/We acknowledge and declare that:

- I/We have received and read the Information Memorandum (IM) to which this Application Form relates.
- I/We agree to be bound by the IM and the constitution of the Fund (as amended from time to time).
- 3. I/We have received and accepted this offer in Australia.
- 4. I/We am/are at least 18 years of age.
- All the information provided by me/us in this Application Form is true and correct.
- I/We agree that Hamilton can provide information on the status of my/our investment to my/our nominated financial adviser/broker.
- 7. I/We agree to Hamilton and Rees Pritchard Investor Services Pty Limited collecting, using and disclosing my/our personal information.
- I/We agree that Hamilton is authorised to apply the TFN or ABN provided above to all future applications for Units, including reinvestments unless I/we notify Hamilton otherwise.
- 9. I/We acknowledge that Hamilton is required to comply with the antimoney laundering laws in force in a number of jurisdictions including the *Financial Transactions Reports Act* 1988 (Cth) and I/we undertake to provide Hamilton with such additional information or documentation as Hamilton may request of me/us from time to time, to ensure its compliance with such requirements.
- 10. If I/we fail to provide Hamilton with any information or documentation requested of me/us, my/our application for Units may be refused, any Units I/we hold may be compulsorily redeemed, and any disposal request made by me/us may be delayed or refused, and Hamilton will not be liable for any consequential loss to me/us.
- 11. I/We understand the risks associated with an investment in the Fund as they are outlined in the IM and understand that there may be other risks.
- 12. I/We acknowledge that Hamilton reserves the right to reject any application or to allocate to any applicant a lesser number of Units than the number applied for.
- 13. I/We understand that the Fund may invest in cash for significant periods until monies can be invested in the assets.
- 14. I/We acknowledge that if I/we do not provide Hamilton with information as requested, or if there is a delay in providing Hamilton with this information, Hamilton may not be able to open my/our account. I/We agree that Hamilton is not liable for any loss incurred by me/us as a result of any action of Hamilton which either delays an account being opened or results in an application being declined, when the action is necessary to enable Hamilton to comply with its obligations under AML/CTF laws and various taxation legislation. I/We acknowledge that Hamilton may require further information from me/us from time to time in order to meet its obligations under AML/CTF laws and various taxation legislation and I/we agree to provide Hamilton with whatever additional information is reasonably required in order for Hamilton to meet its obligations. I/we indemnify Hamilton against any loss caused by my/our failure to provide such information or assistance.
- 15. I/We will not knowingly do anything to put Hamilton n breach of the AML/CTF laws and various taxation legislation. I/We agree to promptly notify Hamilton if I/we am/are aware of anything that would put Hamilton in breach of AML/CTF laws.
- 16. I/we agree to provide additional information and assistance if requested, and to comply with all reasonable requests to facilitate Hamilton's compliance with AML/CTF laws in Australia or equivalent laws in an overseas jurisdiction.

- 17. I/We acknowledge that I/we have no reason to suspect that:
  - the money used to fund my/our investments through this account is derived from or related to money laundering, terrorism financing or similar activities (illegal activities); and
  - proceeds of my/our investments through this account will fund illegal activities.
- I/We am/are not a "politically exposed" person or organisation for the purpose of any AML/CTF law.
- I/We acknowledge that Hamilton is subject to AML/CTF laws. In making an application, I/We consent to Hamilton disclosing, in connection with AML/CTF laws, any of my/ our Personal Information (as defined in the Privacy Act 1988 (Cth)).
- 20. I/We acknowledge that in certain circumstances Hamilton may be obliged to freeze or block an account where it is used in connection with illegal activities or suspected illegal activities. Freezing or blocking may result from the account monitoring that is required by AML/CTF laws. If the account is frozen or blocked, Hamilton is not liable to me/us for any consequences or losses whatsoever and I/we agree to indemnify Hamilton if Hamilton is found liable to a third party in connection with the freezing or blocking of my/our account.
- I/We consent to details about my/our application and holdings being disclosed in accordance with the *Privacy* section of the IM.
- 22. I/We acknowledge that Hamilton retains the right not to provide services or issue products to any applicant.
  - I/We confirm that Hamilton is authorised to accept and act upon any instructions in respect of this application and the units to which it relates given by me/us by email or electronic means. If instructions are given by email or electronic means, the onus is on me/us to ensure that  $% \left( 1\right) =\left( 1\right) \left( 1\right) =\left( 1\right) \left( 1\right) \left$ such instructions are received in legible form and I/we undertake to confirm them in writing. I/We indemnify Hamilton against any loss arising as a result of any of them acting on email or electronic instructions. I/we acknowledge and agree that the words "execution", "signed", "signature" and words of like import in any such instruction include electronic signatures (including any electronically scanned and transmitted version of an original signature, digital signature, electronic symbol or other such electronic signing process) and shall be of the same legal effect, validity or enforceability as a manually executed signature to the extent and as provided for in any applicable law, including the Electronic Transactions At 1999 (Cth), Hamilton may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction or other instrument believed, in good faith, to be genuine or to be signed by properly authorised persons. I/we agree to keep Hamilton indemnified against any loss of any nature whatsoever arising to any of them as a result of Hamilton acting upon instructions signed and/or submitted by electronic means.
- 24. I/we acknowledge that investments in the Fund are subject to investment risk, including possible delays in repayment and loss of income or principal invested.
- 25. I/We understand that the income distributed by the Fund (if any) and the value of Units in the Fund may rise and fall from time to time.
- 26. I/We acknowledge that Units may be redeemed or monies deducted from my/our withdrawal proceeds without me/us asking in order to pay any fees owing to Hamilton or any other person and authorise Hamilton to redeem such number of units or deduct such monies as is necessary to meet any fees I/we owe Hamilton or any other person. I/We acknowledge this may have tax consequences for my/our investment in the Fund.
- 27. I/we acknowledge that Hamilton, does not guarantee the performance of the Fund or its underlying investments, the repayment of capital from the Fund or any particular rate of return.

| 9. Applicants signatures              |                                    |                                    |
|---------------------------------------|------------------------------------|------------------------------------|
| Applicant 1/Director 1                | Applicant 2/Director 2             | Applicant 3/Director 3             |
| Name                                  | Name                               | Name                               |
| If a company, your corporate title    | If a company, your corporate title | If a company, your corporate title |
| □ Director                            | ☐ Director                         | □ Director                         |
| ☐ Sole director                       | ☐ Secretary                        | □ Secretary                        |
| ☐ Sole director and sole secretary    | ☐ Other, please specify below      | ☐ Other, please specify below      |
| $\square$ Other, please specify below |                                    |                                    |
| Signature                             | Signature                          | Signature                          |
| Date                                  | Date                               | Date                               |

# E. Qualified Accountants Certificate

#### Certificate under Section 761G(7) of the Corporations Act

To Hamilton Asset Management Limited

| Full name of accountant  |  |
|--|--|
|  |  |
| of   |  |
| Name of firm   |  |
| Address of firm  |  |
| Telephone number   |  |
| Email  |  |
| am a Qualified Accountant <sup>1</sup> for the purposes of section 761G(7) <sup>2</sup>  | of the Cornorations Act  |
| I am a member of   | of the corporations rec  |
| Name of professional body  |  |
| Membership number  | Membership designation   |
| (a) this Certificate is given to Hamilton Asset Management Limite  | ed to determine whether it is able to make offers of units in the Newcastle Securities & Gene  |
| Trust and Hamilton Cash Management Trust to the individual Corporations Act 2001 (Cth);  (b) offers of units in the Newcastle Securities & General Trust an Limited may be made on the basis of this Certificate; and  (c) Hamilton Asset Management Limited is authorised to send the light certify that the investor (or someone who the investor controls <sup>3</sup> )  | or the person who controls the investor where that investor is a company or trust <sup>4</sup> ) has:  |
| Trust and Hamilton Cash Management Trust to the individual Corporations Act 2001 (Cth);  (b) offers of units in the Newcastle Securities & General Trust an Limited may be made on the basis of this Certificate; and  (c) Hamilton Asset Management Limited is authorised to send the certify that the investor (or someone who the investor controls <sup>3</sup> net assets of at least A\$2.5 million or   | I/company/trust whose details are set out below ("investor") in compliance with the d Hamilton Cash Management Trust made to the investor by Hamilton Asset Management he renewal certificate to me on the investor's behalf.  or the person who controls the investor where that investor is a company or trust <sup>4</sup> ) has:           |
| Trust and Hamilton Cash Management Trust to the individual Corporations Act 2001 (Cth);  (b) offers of units in the Newcastle Securities & General Trust an Limited may be made on the basis of this Certificate; and  (c) Hamilton Asset Management Limited is authorised to send the certify that the investor (or someone who the investor controls net assets of at least A\$2.5 million or  gross income for each of the last two financial years of at least                                       | I/company/trust whose details are set out below ("investor") in compliance with the d Hamilton Cash Management Trust made to the investor by Hamilton Asset Management he renewal certificate to me on the investor's behalf.  or the person who controls the investor where that investor is a company or trust4) has:                        |
| Trust and Hamilton Cash Management Trust to the individual Corporations Act 2001 (Cth);  (b) offers of units in the Newcastle Securities & General Trust an Limited may be made on the basis of this Certificate; and  (c) Hamilton Asset Management Limited is authorised to send the local certify that the investor (or someone who the investor controls net assets of at least A\$2.5 million or gross income for each of the last two financial years of at least Name of individual/company/trust | I/company/trust whose details are set out below ("investor") in compliance with the d Hamilton Cash Management Trust made to the investor by Hamilton Asset Management he renewal certificate to me on the investor's behalf.  or the person who controls the investor where that investor is a company or trust4) has:  t A\$250,000 per year |

<sup>1</sup>ASIC has declared that members of the following Australian accounting bodies as qualified accountants for the purpose of certifying an investor's assets or income:- The Institute of Chartered Accountants in Australia, the Australian Society of Certified Practicing Accountants and the National Institute of Accountants along with a number of eligible foreign professional bodies who can be confirmed on request.

<sup>2</sup> s 761G(7) provides that financial products and a financial service which is not, or is not related to a general insurance product, a superannuation product or an RSA product, can be provided to an investor as a wholesale client if this Certificate, not more than 2 years old, is provided. Under the Corporations Act, wholesale clients are not required to be provided with a Financial Service Guide, a Statement of Advice, a Warning when providing general securities advice or Confirmation of transactions and, the financial services provider is not required to Have a Reasonable Basis of Advice, keep a Record of Advice when further personal advice is given, to make available internal disputes resolution procedures and provide an external disputes resolution scheme.

<sup>3</sup> In calculating the net assets of \$2,500,000 or gross income of \$250,000, the investor may include the net assets or gross income (as relevant) of any company or trust the investor controls [see Corporations Regulation 7.6.02AC].

<sup>4</sup> Where the investor is a company or trust controlled by someone who has a certificate from a qualified accountant, the investor may be considered wholesale [see Corporations Regulation 7.6.02AB].