

Investor Relations contact details Phone

Within Australia: 02 8227 7400 International: +61 2 8227 7400

Transfer

Use this form if you are an existing investor and wish to transfer units to another investor.

Complete all sections in BLOCK letters using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

1. Instructions if you are transferring units to an existing investor.

If you are transferring units to an existing investor, the following needs to be completed:

- transferor needs to write their account number and account name as it appears on your latest statement
- transferee needs to write their account number and account name in section 2 as it appears on your latest statement
- both the transferor and transferee need to sign this form as per the 'Signing instructions' in section 5.

2. Instructions if you are transferring units to a new investor.

If you are transferring units to a new investor, the transferor needs to complete the following:

- write their account number and account name as it appears on the latest statement
- sign this form as per the 'Signing instructions' in section 5.

The transferee needs to:

- write their name in section 4 of this form and then sign the form as per the 'Signing instructions' in section 5
- complete the fund's application form
- complete the relevant identification document accompanying the application form
- arrange for copies of their identification documents to be certified and
- complete the tax information form accompanying the application form

3. Send your documents to us.

Before you submit your transfer form, please check that:

- both the transferor and transferee have signed the transfer form
- the transfer form and application form (if applicable), along with relevant identification form and documents and the tax information form (if applicable) are included.

Please post your **original signed** transfer form, **original** application and original tax information form (if applicable) and **original certified** copies of the relevant identification documents (if applicable) to us.

Send by post: Paradice Investment Management

GPO Box 804 Melbourne VIC 3001

4. If you have any questions, please contact Paradice Investor Relations on the above number, or investorrelations@paradice.com

1 Transfer details

Please indicate if you are making a full transfer or a partial transfer. If you are making a partial transfer, please specify the number of units or dollar amount you wish to transfer.

FUND NAME	APIR CODE	TRANSFER AMOUNT \$AUD	TRANSFER OPTION (indicate preference with an X)	
			Balance	Number of units
Paradice Australian Equities Fund	ETL8084AU			
Paradice Australian Mid Cap Fund – Class B	ETL8772AU			
Paradice Australian Small Cap Fund – Class B	ETL0739AU			
Paradice Global Small Cap Fund	ETL0365AU			
Paradice Australian Small Cap Opportunities Fund – Class A	ETL4624AU			
Paradice Equity Alpha Plus Fund	ETL8096AU			
No Change of Beneficial Ownership				
2 Transferor/Seller details				
Investor number Investor name				
3 Transferee/Buyer details – existing investors only				
If you are transferring units to a new investor, please complete the details below.				
Investor number Investor name				
4 Transferee/Buyer – new investors				
If you are transferring units to a new investor, please complete details below. The following forms also need to be completed the new investor and can be obtained from the product discloss statement:	by Title	stor details Full given names		
application form	Surname			
identification form				
• tax information form. Company/Trust/Superannuation fund				

5 Signing instructions

By completing and signing this form, you:

- authorise us to act according with the instructions on this form
- acknowledge that the instructions on this form supersede all previous instructions received by us, and
- agree to indemnify us from and against all losses, costs, expenses, claims, actions or proceedings brought against us in connection with following your instructions on this form.

Who needs to sign this form

Individual – where the investment is in one name, the account holder must sign.

Joint Holding – where the investment is in more than one name, all of the account holders must sign.

Companies – where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust – the trustee(s) must sign this form. Trustee(s) signing on Transferee/Buyer behalf of the trust confirm that the trustee(s) is/are acting in Signature of investor 1, director or authorised signatory accordance with such designated powers and authority under the trust deed. Power of Attorney – if you have not already lodged the Power Please print full name of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document Date (DD/MM/YYYY) of the Power of Attorney. I/We attest that the Power of DD / MM / Attorney has not been rescinded or revoked and that the Donor is still living. Company officer (please indicate company capacity) Transferor/Seller Director Signature of investor 1, director or authorised signatory Sole director and company secretary Authorised signatory Signature of investor 2, director/company secretary or authorised Please print full name signatory Date (DD/MM/YYYY) Please print full name Company officer (please indicate company capacity) Director Date (DD/MM/YYYY) Sole director and company secretary | **|** | M M | **|** Authorised signatory Company officer (please indicate company capacity) Director Signature of investor 2, director/company secretary or authorised signatory Company secretary Authorised signatory Please print full name Date (DD/MM/YYYY) Company officer (please indicate company capacity) Director Company secretary Authorised signatory