

NOTIFICATION TO ADD AN ADVISER

Fund Name:			
1. Investor Details			
Investor Name:			
Investor Number:			
Contact Details			
Contact name:		Contact phone:	
Contact email:			
2. Advisor Details			
Adviser Name:			
Advisory Firm:			
AFSL Number:		Contact phone:	
Contact email:			
acknowledge that an privacy policy, a copy By submitting this fo	y personal information I/we provide to of which can be found at <u>www.linkfunds</u>	LFS will be collected and hand solutions.com or posted / emailed o my/our investment I/we com	mpleted instructions set out above. I/we lled in accordance with Link Fund Solutions' d to us if we contact LFS on +612 8767 1114. sent to my/our personal information being
Signature		Signature	
Print Name		Print Name	
Title (circle)	Individual / Sole Director/ Director/ Trustee	Title (circle)	Individual / Sole Director/ Director/ Trustee
Date		Date	
cannot match the sig	mature to the initial application form or s		sed signatories on this account. Where we ybe delays in processing of this request.
4. Completed Form			
Please return the co	ompleted form to:		Martin Contractor
• scan and	fax this request to (02) 9221 1194 or		
Please post this completed form to:			

Link Fund Solutions Attention: Unitholder Services Locked Bag 5038 Parramatta NSW 2124

If you have any questions about this form please contact us on +612 8767 1114.