

Change of Payment Details and Distribution Election Form

Investor number

Registered investor name(s)

Phone number (business hours)

A Reason(s) for completing this form

Please indicate below the details you wish to amend and complete the applicable sections:

- Change distribution bank account – Section B
- Change distribution election – Section C
- Notification of tax file number (TFN) – Section D

B Change bank account

The bank account details you provide below will replace the previously nominated account and will be held on record and maintained to pay any future income distributions. This account must be with an Australian Authorised Deposit-taking Institution (ADI) and must be in the name of the investor as we will not pay to a third party or offshore bank account. Please check these details carefully as it is your responsibility to ensure all payee account details are correct. Incorrect details may result in a loss of funds and we do not guarantee their recovery. We do not accept liability for funds which are unable to be recovered.

Please note: This request will not cancel any distribution reinvestment election made previously (if any) unless we receive specific instructions from you in Section C of this form.

Name of financial institution

Account name

BSB

Account number

Please note: If your account number does not have 9 digits please do not add zeros at the beginning or end of your account number unnecessarily as it may result in an incorrect payment. You should write the account number exactly as it is shown on your bank statement.

C Change distribution election

You may elect to receive distributions paid to your bank account or reinvest them as additional units in the Fund(s). Please indicate your preference below.

Fund Name	ARSN	Distribution option	
		Reinvest	Deposit in nominated account
TPT At Call Fund	093 458 336	<input type="checkbox"/>	<input type="checkbox"/>
TPT Fixed Term Fund	093 458 256	<input type="checkbox"/>	<input type="checkbox"/>
TPT Long Term Fund	093 255 791	<input type="checkbox"/>	<input type="checkbox"/>
TPT Select Mortgage Fund	089 139 382	<input type="checkbox"/>	<input type="checkbox"/>
TPT Australian Share Fund	093 457 955	<input type="checkbox"/>	<input type="checkbox"/>
TPT International Share Fund	120 944 470	<input type="checkbox"/>	<input type="checkbox"/>
TPT Diversified Property Fund	120 944 318	<input type="checkbox"/>	<input type="checkbox"/>
TPT Balanced Fund	093 458 461	<input type="checkbox"/>	<input type="checkbox"/>

D Notification of TFN/ABN

If you choose not to quote your TFN/ABN or claim an exemption, we are required to deduct tax at the highest marginal rate plus the Medicare levy from any income payable to you. If provided, your TFN/ABN will apply automatically to any future investment in the TPT Wealth funds unless you indicate otherwise. You can choose not to quote your TFN/ABN or claim an exemption. Deciding not to quote a TFN is not an offence. We are authorised to receive tax file information under tax law. For more information on Tax File, Australian Business Numbers and Exemptions, please call the Australian Taxation Office.

Tax File Number exemption details

Any applicant who has a TFN but is exempt from tax should still quote their TFN. Exempt applicants should then indicate their exemption in the relevant section of this form to avoid tax being deducted from any income distribution. Applicants in the name of a trustee on behalf of a minor should quote their TFN.

Investor 1 / Company / Partnership / Trust / Superannuation Fund

Name

TFN or Exemption

 - -

ABN

 - - -

Investor 2

Name

TFN or Exemption

 - -

E Declaration and signature

By signing this form, I/we:

- declare that I/we have read and understood and agree to be bound by the terms and conditions of the current PDS, Additional Information Booklet and Application Form for the relevant Fund(s);
- declare that all details previously disclosed and provided in this Change of Payment Details and Distribution Election 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 power of attorney) declare that I/we have not received notice of revocation of that power;
- authorise TPT Wealth to act upon instructions by post, email or facsimile (as applicable) with regard to the units or interests applied for (and any further units or interests acquired) or a matter in connection with them or any of them without liability in respect of any transfer, payment or any other act done in accordance with such instructions and notwithstanding the same was not signed or sent by me/us. I/We agree that this authorisation shall remain in force until notice in writing of its termination is received by TPT Wealth;
- acknowledge that investments in the Fund(s) are subject to various elements of risk, including possible delays in repayment and loss of income or capital invested;
- acknowledge all personal information is collected in accordance with TPT Wealth's Privacy Policy, a copy of which is available at tptwealth.com.au.

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 office/authorised signatory.
Power of attorney	If signed under power of attorney, the power of attorney must have been previously noted by the registry.

E Declaration and signature continued

Signature 1

Name

Date

Title

- Investor 1 (individual) Director
 Secretary Sole director or secretary
 Non-corporate trustee Partner
 Other office bearer or attorney (please specify)

Signature 2

Name

Date

Title

- Investor 2 (individual) Director
 Secretary Sole director or secretary
 Non-corporate trustee Partner
 Other office bearer or attorney (please specify)

Once complete, please
return this form to



TPT Wealth Limited Unit Registry
C/- LINK Market Services Limited, Locked Bag 5038, Parramatta NSW 2124
Fax: 02 9287 0328, email: tpt@linkmarketservices.com.au

Office Use Only

All bank account details confirmed

Method of contact: Face to Face Phone – Phone number called (If applicable)

Time Contacted: Who you spoke with:

Approved by:

Name	Position	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name	Position	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>