



Company or Trust in which Investment is Held

**Full Name(s)
of Registered
Holding**

Security Transfer Registrars Pty Ltd
770 Canning Highway, Applecross WA 6153
PO Box 535, Applecross WA 6953
Phone: 61 8 9315 2333
Facsimile: 61 8 9315 2233
Email: registrar@securitytransfer.com.au
Website: www.securitytransfer.com.au

Please mark this box if you require a shareholder statement to be sent following your change of address.

Securityholder Reference Number (SRN)

Change of Address Notification and Indemnity Form

Uncertificated CHESSE Holdings – This form must be forwarded to the CHESSE Sponsoring Broker or Non-Broker Participant.

Uncertificated Issuer Sponsored Holdings – This form must be forwarded to the Issuer’s Registry.

Please use a **black pen**. Print in **CAPITAL** letters inside the boxes

A B C

A Current registered (old) address

Unit Street Number Street Name

Or Post Office Box or other mail details (if applicable)

City/Suburb/Town

State

Post Code

New Address Details

Unit Street Number Street Name

Or Post Office Box or other mail details (if applicable)

City/Suburb/Town

State

Post Code

Contact Name

Telephone Number – Business Hours

Telephone Number – After Hours

B Sign Here – This section must be signed and witnessed for your instructions to be executed

I/We request you to amend the registered address in your records to the above address.

I/We acknowledge that these instructions supersede and have priority over all previous instructions in respect to my/our securities.

I am/We are one and the same as the name registered on the holding.

There has been no change in beneficial ownership and I/we request my/our full and correct address be recorded on the register.

In consideration of the security issuer amending the register I/we hereby covenant to indemnify and forever keep indemnified the security issuer, the directors and trustees of the security issuer, the security registrar and the directors and officers of the security registrar from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs and expenses whatsoever which may be made or brought against them by reason of compliance with this request.

Individual or Securityholder 1

Director

Securityholder 2

Director/Company Secretary

Securityholder 3

Sole Director and Sole Company Secretary

Witness

Witness

Witness

The witness(es) certifies that the person(s) who has/have signed this statement is/are known to them and has/have signed in the presence of the witness with their normal signature(s).

Individual:

This form is to be signed by the securityholder.

Joint Holding:

Where the holding is in more than one name, all of the securityholders must sign.

Power of Attorney:

To sign as Power of Attorney, you must have already lodged it with the registry. Alternatively, attach a certified photocopy of the Power of Attorney to this form.

Companies:

Director, Company Secretary, Sole Director and Sole Company Secretary can sign. Please indicate the office held by signing the appropriate space.

Day Month Year