## CROMWELL PHOENIX GLOBAL OPPORTUNITIES FUND ADDITIONAL UNIT APPLICATION FORM (GOF)





This application form is for existing investors in the Cromwell Phoenix Global Opportunities Fund who wish to apply for additional units in the Fund. The additional investment amount will be added to your existing investment in the Fund. You can only use this form if your application details are unchanged.

Please complete this form using BLACK INK and write clearly within the boxes in CAPITAL LETTERS. Mark appropriate answer boxes with a tick  $[\checkmark]$ . You should read the PDS dated 26 October 2021 and TMD issued by Cromwell Funds Management Limited ABN 63 114 782 777, AFSL 333214 (CFM), before completing this investment application form.

## PART 1 INVESTOR DETAILS

These details can be found on the welcome letter which confirmed your initial investment in the Fund.

Investment Reference Number Full name(s) of Registered Holding (Example: "John Smith" or "John Smith ATF John R Smith Super Fund")								
PART 2	INVESTMENT AM	IOUNT						
Enter the amount you	would like to increa	ase your investment by.						
Additional Investmen	t Amount:	\$	0 0 0 .	0 0				
PART 3	ADVISER DETAIL	<b>S</b> (if applicable)						
Adviser given name			A	dviser surname				
Adviser company			A	dviser phone	-			
Adviser email								
Licensed Dealer			Li	cence No				
		ND AUTHORISATION urrent PDS and agree to be bound by it						
In the case of joint applicati account and bind the other power. I/we acknowledge personal information (includ application can be accepted detailed in the PDS, our app or incorrect details having b	ons, the joint applicants a investor for future transa at I/we have read and un ing marketing) contained or rejected by CFM. I/we lication may be rejected b	ding its directors and employees) guarar agree that unless otherwise indicated on actions. If this application is signed und iderstood the 'Privacy Statement' in the under that heading and to our adviser pr understand that if I/we fail to provide ar by CFM and CFM is released and indemn that CFM may provide details of our inv Date	n the application der Power of Atto current PDS. Unt roviding further peny information req ified in respect of	form, the units will be rney, the Attorney de il I/we inform CFM ot ersonal information to uested or do not agre any loss or liability ari dviser group or advise	e held as joint tenan clares that he/she h herwise, l/we will be CFM as required or be to any of the poss ising from its inabilit	tts and either investor i nas not received notice e taken to have conser reasonably deemed ne sible uses or disclosure y to accept an applicati	is able to operate the e of revocation of the nted to all uses of our ecessary by CFM. Any e of our information as ion due to inadequate	
Name			Name					
PART 5	PAYMENT DETAI	LS						
These details are requ	lired so your payme	nt can be matched to your appli	ication form.					
Electronic Transfer	Account Nan	3 Account: 838 152 593 ne: CFML GOF Application Acco erence: Applicant Name	unt	F	387241 Reference numl Call 1300 737 76	ber:		
IMPORTANT INFORMATION REQUIRED – FATCA/CRS Cromwell is required to collect and report to the Australian Taxation Office (ATO) certain informa about the tax residency of our unitholders. If you have not supplied Cromwell with your tax reside status previously, please do so by one of the following methods: Online via your registered InvestorServe Access Visit www.investorserve.com.au > My Details > FATCA-CRS Information					Send your Fund's re	Boarcharbon Smart Business Solutions Send your completed application forms to the Fund's registrar:		

**Email or Post a FATCA/CRS Form** - Call Cromwell's Investor Services Team on **1300 268 078** to obtain a copy of the Automatic Exchange of Information (AEOI) Form for you to complete and return. *Not providing this information to Cromwell may delay the processing of your transaction.* 

02 9252 1987

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