

CROMWELL FUNDS MANAGEMENT (CFM) SIGNATURE VERIFICATION FORM



CROMWELL FUNDS MANAGEMENT LIMITED ABN 63 114 782 777 AFSL 333214 (CFM).

Please complete this form using BLACK INK and write clearly within the boxes in CAPITAL LETTERS.
Mark appropriate answer boxes with a tick (✓).

PART 1 APPLICATION DETAILS

Please print, complete your details associated with this application, sign and post the signature verification document to the address provided at the bottom or email to cromwell@boardroomlimited.com.au. Your application will not be processed until your signature has been received.

Date Application Submitted: / /

Investor Type:

Full Name of Registered Holdings:

Registered Address:

Address

City

State

Postcode

PART 2 INVESTMENT DETAILS

Amount:

PART 3 DECLARATION AND AUTHORISATION

This document stores this signature(s) against all investments made in the name of the registered holding for the operation of the holding. It will be used to verify signatures on request including (but not limited to) withdrawal requests, change of bank account and change of address. By completing this Signature Verification document, you certify that you are authorised to sign on behalf of the registered holding and you authorise the relevant Cromwell Funds Management related party to verify the validity of future requests by comparing the signature(s) on future requests to those provided below.

I/We authorise you to act in accordance with my/our instructions set out above. I/We acknowledge that these instructions supersede and have priority over all previous instructions in respect to my/our unitholding.

Signature of Authorised Signatory 1

SIGNATURE	Date
	<input type="text"/> / <input type="text"/> / <input type="text"/>

Signatory's Full Name

If a Company Officer or Trustee, please specify your title:

Director Sole Director & Company Secretary Trustee

Signature of Authorised Signatory 2

SIGNATURE	Date
	<input type="text"/> / <input type="text"/> / <input type="text"/>

Signatory's Full Name

If a Company Officer or Trustee, please specify your title:

Director Sole Director & Company Secretary Trustee

Please complete an additional form for additional authorised signatories

If you have any questions in relation to this form, please call Cromwell's Investor Services Team on 1300 268 078.



Return completed form to:

Email: cromwell@boardroomlimited.com.au

Post: Boardroom Pty Limited
GPO Box 3993, Sydney NSW 2001