

Application for single matching account service

We, the undersigned, representing,

Registered Company name (in full) _____

Address _____

City _____ Post code _____ Country _____

Telephone _____ Fax _____

Email _____

request Clearstream Banking S.A.¹ to designate the following accounts previously opened or currently being opened in our name for the single matching account service.

Account designated as the group matching account (GMA): _____

Account numbers to be designated as members of the single matching account group:

We acknowledge that the setup of the service on the specified account(s) will only be effective upon confirmation from CBL. We acknowledge that the Sub-Matching Accounts (SMAs) are not used for investment funds activities and do not maintain any holdings of investment fund shares.

Authorised signature(s)

Signature _____	Signature _____
Name _____	Name _____
Title _____	Title _____
Place _____	Place _____
Date _____	Date _____

Please return the completed form to:
Clearstream Banking S.A.
Attention: Client Data Management
L-2967 Luxembourg

1. Clearstream Banking S.A. (CBL), with its registered office located at 42 avenue JF Kennedy, L-1855 Luxembourg, Luxembourg and registration R.C.S. Luxembourg number B 9248. CBL is also registered as an Australian CS (Overseas) Facility, under subsection 824B(2) of the Corporations Act 2001, with registration number ARBN 675 244 783.