

1 CLIENT DETAILS

INVESTOR 1

Title (Mr/Mrs/Ms etc)

Account Number (if known)

Surname/Company Name

Given Name/Company Contact

Account Designation

 A/C>

INVESTOR 2

Title (Mr/Mrs/Ms etc)

Surname

Given Name

2 ADDITIONAL CONTRIBUTION DETAILS

Contribution Amount

3 ALLOCATE MY CONTRIBUTION DETAILS

Allocate my additional contributions As per current investment strategy As indicated in section 4

Source of Funds Use current in force Debit Authority New Debit Authority/
Cheque attached



Additional Contributions Form Investment Fund

5 AUTHORISATION & SIGNATURE(S)

I/We acknowledge this request will be processed in accordance with the LifeFocus Investment Fund PDS and applicable legislation.

<i>Signature (1)</i>	X	<i>Date</i>	
<i>Print Name</i>		<i>Title</i>	
<i>Signature (2)</i>	X	<i>Date</i>	
<i>Print Name</i>		<i>Title</i>	

Send this form to: LifeFocus Investment Fund
PO Box 1282
ALBURY NSW 2640

All cheques should be made payable to
"AET Limited ACF LifeFocus Investment Fund"

Or attach a completed Direct Debit Request Form if you are changing your Debit Authority