

	ed form to: equity.lending@nab.com.au ty Lending contact name			
Facility deta			Facility number	
Client/Facility nam	e		Facility number	
Definence fr				
Please complete if	o <mark>m another margin lender</mark> you wish to transfer your existing margin loan to NAB Equity Lending ransfer to NAB Equity Lending.	g. Please provide details of the s	ecurities and/or managed	
Name of existing m	argin lender E	xisting account details/number	Existing loan balance	
			\$	
	ting shares and/or managed funds res/managed funds are registered: First given name			
Mr Mrs	Ms Miss Other			
Surname	Second given nar	ne		
Participant sponsored shares (attach copies of most recent CHESS statements)Name of brokerParticipant Identifier (PID)Holder Identification Number (HIN)				
	d all my/our CHESS holdings ies listed below from my existing Sponsoring Participant named above	a to National Margin Sonvicos Dtu	(1+d (ARN 01 000 222 072)	
ASX code	Security name		Quantity	
			_	
L			_	
			_ [
	tach copies of most recent unit holder statements) is active and accessible for navigation			
APIR code	Name of managed fund	Quantity		
			_	
			_	

Applicant signatures

I/We (or acting in capacity as Company Directors or trustee of a Trust) authorise the transfer of shares listed to National Margin Services Pty Ltd, and the managed fund investments to NMS Nominees Pty Ltd as required. I/We also authorise National Australia Bank Limited to pay out any outstanding loan against these shareholdings or managed fund holdings (if any).

I/We consent to companies of the National Australia Bank Group using and disclosing my/our personal information as contemplated in the section titled Privacy Notification in the NAB Equity Lending Facility Terms.

I/we acknowledge that National Margin Services Pty Ltd ('NMS') and NMS Nominees Pty Ltd ('Nominees') are wholly owned subsidiaries of National Australia Bank Limited (NAB). NMS and Nominees are not Authorised Deposit Taking Institutions and their obligations do not represent deposits or other liabilities of NAB. NAB does not guarantee the obligations or performance of NMS or Nominees or the products or services these subsidiaries offer.

I/we acknowledge that NAB does not provide any financial advice or recommendation about the Facility (including any specific stock or managed fund investment which may be accessed via the Facility).

NAB recommends that you seek independent legal, tax and financial advice on the suitability of the Facility (including a product if relevant) for you.

Note: If you are transferring your entire share portfolio and HIN to National Margin Services Pty Ltd, by authorising the transfer, your sponsorship agreement with the existing broker/margin lender will cease.

Individual/Joint				
Full name		Full name		
Signature	Date	Signature	Date	
×	/ /	×	/ /	
Contact number	_	Contact number		
		[
Company applicant* Executed by				
Name of company and ABN				
in accordance with subsection 127 (1)	of the Corporations Act by auth	nority of its director(s).		
Full name		Full name		
Signature of authorised person	Date	Signature of authorised person	Date	
×	/ /	×	/ /	
Office held (Director/Secretary)		Office held (Director/Secretary)		
Contact number		Contact number		

If the company applicant is a proprietary company with a sole director who is also the sole company secretary, that person states that they sign as both the sole director and the sole company secretary. In all other cases, this application should be signed by two directors or a director and company secretary.