



Millinium's Multi-Strategy Income Fund

Withdrawal/Change Form for Distribution Reinvestment Plan/ Regular Investment Plan - Wholesale/Sophisticated H Class Units

Instructions

You may use this form to:

- withdraw all or part of your investment; and/or
- commence, continue or cease a regular investment plan.

1 Investor details

Investor Name:

Investor number:

Contact Name:

Telephone:

2 Redemption Request

Fill out the details below to WITHDRAW all or part of your investment in Millinium's Multi-Strategy Income Fund.

Amount being
redeemed/
withdrawn

Withdrawal Amount \$

PLEASE CONFIRM DETAILS WHERE FUNDS ARE TO BE DEPOSITED

Please deposit in nominated account
currently held on file.

If no account held on file please deposit into the following
account. Note - withdrawals cannot be paid to third parties.

Financial
Institution:

Account Name:

BSB:

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Account
Number:

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3 Distribution Reinvestment Plan/Regular Investment Plan

Fill out the details below to continue, commence or cease participation in one of the following plans.

DISTRIBUTION REINVESTMENT
PLAN

Commence/Participate

DO NOT continue in plan.

Financial
Institution:

Account Name:

BSB:

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Account
Number:

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REGULAR INVESTMENT PLAN

Commence a Regular Investment Plan ##

Continue the Regular Investment Plan

Cease the Regular Investment Plan

To commence a Regular Investment Plan the Investor must complete the Direct Debit Request Form. If you did not receive a Direct Debit Request Form with this Form please contact Investor Services on 02 8012 8650 to request one.

^^Distributions will be paid in accordance with the terms outlined in the Product Disclosure Statement. If your nominated account details have changed since the last time you provided them to us, or if you have not provided us with a nominated account, please complete the section below.

4 Change of Nominated Account Details

Please list the **Application ID** numbers for **ALL** investments in Millinium’s Multi-Strategy Income Fund you would like to change.

Application ID	Financial Institution	Account Name	BSB	Account Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

5 Further Instructions

Are there any other documents to attach with your request/instruction(s)?

Yes

No

6 Acknowledgement

Acknowledgement: By signing this form and making the above election(s), I/we confirm that the terms and conditions, acknowledgements, and representations and warranties as given in the original application form continue to apply to my/our investment in the Fund.

Investor signature

Date

7 OFFICE USE ONLY

Date Received

Date Actioned