# ADDITIONAL INVESTMENT FORM – REALM SHORT TERM INCOME FUND

## **Additional Investment Form For Existing Investors**

Please use this form if you are already an investor in the Realm Short Term Income Fund and wish to make an additional investment. New investors should complete a new Application Form.

INVESTOR DETAILS		
Number	Name	
Company/Fund/Super Fund Name		
ADDITIONAL INVESTMENT DETAILS		
I/we apply to make an additional investment in the Realm Short	Term Income Fund	
Class of Units	Term meome rand.	
Please select the class of Units you wish to acquire.		
Ordinary Units	·	
Amount: AUD \$		
The minimum additional investment amount must be at l	east AUD \$5,000.	
Please tick the box beside your chosen payment method and co	mplete the required details.	
Electronic Funds Transfer or Direct Deposit		
Bank: St George Bank		
Reference: 'Investor surname/company or trust name' (as Account Name: Boardroom Pty Limited ITF Realm STIF Or		
BSB: 332-027	ullially Class Applications	
Account number: 556094743		
Date of Transfer Reference Used		
Direct Debit Request		
Please complete Section 14 of this Application Form.		
Please note funds will be applied three business days afte	er the request has been completed.	
INIVESTOR CONFIRMATIONS		
INVESTOR CONFIRMATIONS		
I/we declare that all details provided in this application are and correct and I/we undertake to inform you of any char	nd previous applications, including beneficial ownership remain true	
	nvestment and the date of this additional investment, the Fund's	
circumstances and target market may have changed. I/we confirm I/we have read the Fund's latest PDS, all supplemental		
information and TMD for the Fund prior to making this ad situation and needs have not materially changed since my	Iditional investment and consider my/our objectives, financial	
Signature 1*	Signature 2*	
Signature 1	3,8,100.01.6.2	
Full Name	L Full Name	
T di I Name	Turrivanic	
Date	L Date	
Tick capacity (mandatory for companies):	Tick capacity (mandatory for companies):	
Sole Director and Company Secretary	Sole Director and Company Secretary	
Director	Director	
Secretary	Secretary	
Company Seal (if applicable)		
	*Joint applicants must both sign;	
	*Company applications must be signed by two Directors, a Director and Secretary or the Sole Director and Secretary of the	
	company; or	
	*For trust/superannuation fund applications each individual trustee must sign.	

### ACCOUNTANT'S CERTIFICATE THAT CLIENT IS WHOLESALE UNDER SECTION 761G(7) OF THE CORPORATIONS ACT

The following section is only required for Australian Applicants who are investing less than AUD \$500,000.

I certify that:

#### Full Legal Name of Person (Individual or Company)

- has net assets of at least AUD \$2.5 million; or

a gross income for each of the last 2 financial years of at lea	st AUD \$250,000 per year.		
Controlled companies/and or trusts			
It is also confirmed for the purposes of the Corporations Act the	he above named person controls the f	ollowing companies and trusts:	
Full Name of Company/Trust		ABN/ACN/ARBN (if any)	
Full Name of Company/Trust		ABN/ACN/ARBN (if any)	
Full Name of Company/Trust		ABN/ACN/ARBN (if any)	
I confirm that I am a member of one or more of the following	nrofessional hodies (tick appropriate h	iox).	
CPA Australia ("CPA" or "FCPA"); or		onj.	
Institute of Chartered Accountants in Australia ("CA", "A	ACA" or "FCA"); or		
The National Institute of Accountants in Australia ("PNA	a", "FPNA", "FINA" or "MNIA"); or		
Other foreign eligible professional body for the purposes of the Corporations Act (please specify)			
and I have at least 3 years practical experience as an accountry of qualification, not being Australia	countant or auditor and I am giving thi	s certificate in respect of my	
I am subject to and in compliance with the professional	body's continuing education requirem	nents.	
I am aware that the Issuer, and any subsidiary of the Issueby the Corporations Act.	uer may rely on this certificate for sucl	n period of time as is permitted	
I confirm that I am independent of the above-named pe	erson and/or entities.		
Signature of Accountant	Business Address		
Name of Accountant	Name of Firm		
Date			

### **Guidance Notes of completing the Wholesale Client Certificate:**

Certification date is no more than 2-years-old.

In determining the net assets of the person, the net assets of a company or trust controlled by the person may be included in the calculations.

In determining the gross income of the person, the gross income of a company or trust controlled by the person may be included in the calculations.

Refer section 708(8)(d) and section 761G(7). For this purpose "control" has the meaning given to it in section 50AA of the Corporations Act 2001 and, in general, means having the capacity to determine the outcome of decisions about the relevant company's or trust's financial and operating policies.

A list of approved foreign eligible professional bodies is listed by ASIC at:

 $\underline{\text{http://www.asic.gov.au/asic/asic.nsf/byheadline/Certificates+issued+by+a+qualified+accountant?openDocument}}$