

CLASS INVESTMENT SWITCH/WITHDRAWAL FORM OAM SELECT INCOME FUND

Withdrawal Request & Switch Form For Existing Investors

Please use this form if you are already an investor in the OAM Select Income Fund and wish to withdraw or switch your current investment to another class/classes.

INVESTOR DETAILS

Number Name

Company/Fund/Super Fund Name

Application Process:

Step 1 - Complete the Form (i.e. fill in all relevant sections of this form in blue or black pen)

Step 2 - Send your Form (Select your method of delivery below)

Option 1 - Email - Scan and email your Form to info@oneregistryservices.com.au

Option 2 - Post/Delivery - Please post the completed Form to:
OAM Select Income Fund Unit Registry
PO Box R1479
Royal Exchange NSW 1225

If you have any queries relating to the Form, please contact the Registrar on +61 2 8188 1510 or email info@oneregistryservices.com.au

INVESTMENT DETAILS

I/we apply to make a Withdrawal/Switch for the OAM Select Income Fund.

WITHDRAWAL FROM CLASS

OAM Select Income Fund Class A
(Enter class investment ie Class A 31 Dec 2021)

Amount: Amount:
(Minimum of AUD \$1,000 and multiples of \$1,000)

Full Withdrawal

OAM Select Income Fund Class B
(Enter class investment ie Class B 31 Dec 2021)

Amount: Amount:
(Minimum of AUD \$1,000 and multiples of \$1,000)

Full Withdrawal

OAM Select Income Fund Class C
(Enter class investment ie Class C 31 Dec 2021)

Amount: Amount:
(Minimum of AUD \$1,000 and multiples of \$1,000)

Full Withdrawal

OAM Select Income Fund Class D
(Enter class investment ie Class D 31 Dec 2021)

Amount: Amount:
(Minimum of AUD \$1,000 and multiples of \$1,000)

Full Withdrawal

TOTAL WITHDRAWALS FROM CLASSES

Amount:

NET WITHDRAWALS

Amount:

APPLICATION TO CLASS

OAM Select Income Fund Class A (18 months)

Amount: Amount:
(Minimum of AUD \$1,000 and multiples of \$1,000)

OAM Select Income Fund Class B (12 months)

Amount: Amount:
(Minimum of AUD \$1,000 and multiples of \$1,000)

OAM Select Income Fund Class C (6 months)

Amount: Amount:
(Minimum of AUD \$1,000 and multiples of \$1,000)

OAM Select Income Fund Class D (3 months)

Amount: Amount:
(Minimum of AUD \$1,000 and multiples of \$1,000)

TOTAL SWITCH TO CLASSES

Amount:

Please note the following relating to Switches. Refer to the Product Disclosure Statement (**PDS**) dated and issued by One Managed Investment Funds Limited ABN 47 117 400 987 for further information. Unless otherwise defined, capitalised terms used in this form have the same meaning given to them in the PDS.

- I/we acknowledge that any switch from one Class or classes to another involves a full/partial withdrawal from the selected Class followed by an automatic application into the selected Class or classes (**Switch**).
- I/we accept that a Buy/Sell Spread may be payable in respect of a Switch as determined by the Responsible Entity determines otherwise in its absolute discretion.
- I/we acknowledge that there may be tax implications involved in the Switch and I/we will obtain, or have obtained, financial or tax advice prior to completing this form.
- I/we acknowledge that a Switch/Withdrawal may be delayed or rejected by the Responsible Entity in its absolute discretion.
- I/we have given the required notice period for withdrawals and switches as per below table.

CLASS UNIT	INVESTMENT TERM	NOTICE PERIOD <i>(before the end of the Investment Term)</i>	WITHDRAWAL/SWITCH REQUEST WINDOW <i>(within the month specified below)</i>
CLASS A	18 months	6 months	12th month of the investment term
CLASS B	12 months	4 months	8th month of the investment term
CLASS C	6 months	3 months	3rd month of the investment term
CLASS D	3 months	1 month	2nd month of the investment term

Beneficial Ownership Details

I/We declare that all details provided in this Form and previous applications, including beneficial ownership remain true and correct and I/we undertake to inform you of any changes to the information supplied as and when they occur.

INVESTOR CONFIRMATION

Signature 1*

Full Name

Date

Tick capacity (mandatory for companies):

- Sole Director and Company Secretary
 Director
 Secretary

Company Seal (if applicable)

Signature 2*

Full Name

Date

Tick capacity (mandatory for companies):

- Sole Director and Company Secretary
 Director
 Secretary

*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.