

CONTRIBUTION REQUEST

Regular Contribution Plan Request



Dear InvestSMART,

As per the below signature, I/we authorize you to conduct a regular cash contribution via Direct Debit for the SMA listed below. I/ we have read the PDS and Investment Menu and by signing this form, I/we acknowledge that InvestSMART will purchase securities on my/our behalf. By signing this form I/we confirm that cleared funds are available to be debited from our nominated bank account. In the event of the direct debit being rejected, I/we acknowledge that any loss occurred from the loss in share value will be my/our responsibility. I/we understand that the contribution will be made via the Default nominated bank account. These instructions are NOT based on any advice provided by InvestSMART Group.

REGULAR CONTRIBUTION PLAN REQUEST	
Monthly Regular Contribution Amount (\$) (minimum \$100 per month)	
SMA Portfolio Number	
SMA Portfolio Name	

Signature of Account Holder 1

Signature of Account Holder 2 (if applicable)

Full Name of Account Holder 1

Full Name of Account Holder 2 (if applicable)

Date

Date

Please complete, scan and email to invest@investsmart.com.au or alternatively complete and mail to InvestSMART Financial Services Pty Ltd, PO Box 744, QVB, NSW, 1230