OPHIR GLOBAL OPPORTUNITIES FUND

Redemption Request Form

Investor Number	Investor Name	
REDEMPTION AMOUNT		
Please indicate if you would like to withdraw the t	otal amount of your investment or a partial amount.	
Class or Series (if applicable):		
Full withdrawal		
Partial withdrawal, please state amount or unit:		\$AUD
	OR	UNITS
CONTACT DETAILS		
Contact Name	Contact Number	
PAYMENT OF PROCEEDS		
Pay into the account previously advised OR		
Pay redemption proceeds into following accou	nt:	
	y checks to verify bank account changes will be perf natch bank account that is currently recorded in our	
Account Name:	Bank:	
BSB	Account Number	
DECLARATION AND AUTHORISATION		
Please make sure you have completed the 'Full or	Dartial Withdrawal' coction above	
 In signing, I/we authorise that these instru 	ctions be made on my/our behalf and acknowled t accordingly to the terms and conditions of the	
Signature	Name and title of Signatory (block letters please)	Date
Simpature.	Name and title of Cinnaton (black latters also a)	Dete
Signature	Name and title of Signatory (block letters please)	Date

COMPLETED FORM

Please return the completed form by email to **ophir@automicgroup.com.au.** Redemption Forms should be received by 5pm (AEST) three (3) Business Days prior to the last calendar day of the month.

Please note it's up to the investor to ensure Automic have been notified of authorised signatories on this account. Where the signature cannot

be matched to the initial application form or signatory list provided there maybe delays in processing of this request.



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