

Address all correspondence to:
Territory Bonds
C/- Link Market Services Limited
PO Box 3722
Rhodes NSW 2138 Australia

Telephone (free call within Australia): +61 1800 111 441 Email: territorybonds@linkmarketservices.com.au Website: www.linkmarketservices.com.au

		nvestor Number									
TRANSFER FORM Original form MUST be received. Scanned, faxed or photocopied forms will not be accepted.											
A INVESTMENT	T DETAILS	REGISTRY USE ONLY									
I/We request assigning a	and transferring prior to	maturity of the Bonds spe	ecified below:								
Loan No	Rate %	Maturity Date	Transfer Amount								
Note: Minimum investr	ment amount to be he	eld is \$5,000.00 and mult	iples of \$100.								
B TRANSFERO	DR(S)										
Title Given	Name(s) or Company I	Name	Last Name								
Address PO Box/Locked Bag/Car	re of (c/-)/Property nam	e/Building name (if applical	ble)								
Unit Number/Level	Street Number	Street Name									
Suburb/Town Email				State Post Code Telephone Number – Business Hours							
Signature(s) of Transfe Bondholder 1 Sole Director and Sole 0		Bondholder 2 Director/Compan	y Secretary(delete one)	The Common Seal of the company was hereunto affixed in accordance with its Articles of Association in the presence of:							
Director (delete one) Bondholder 3		Bondholder 4		Witness							

		_	Investor Number								
С	TRANSFEREE(S)				1			'			
Title	Given Name(s) or Company Na	me	Last Name								
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Regist	ered Address (only ONE address to be so	upplied)									
		Posto	ode								
Corres	pondence address (if required, only ONE	E address to be supplied)									
	· · · · · · · · · · · · · · · · · · ·	11 /									
		Posto	code								
	e Number*										
Bondho	older 1	Bondholder 3									
Bondho	older 2	Bondholder 4									
'											
*Whilst	there is no obligation to provide either a TF	FN or ABN, where it is not quote	d we are required to	deduct w	ithholo	ling tax	at the h	nighest	t margir	nal tax	x rate.
	Account Details (for interest and princi		•			Ü		Ü	J		
	equest that payments of interest and princip		llowing account:								
Due to	the risks associated with payments to third	d parties, third party payment in		accepte	ed.						
Name i	n which account is held (eg JOHN JAMES	S SMITH)		1 1	-		1 1			-	
				1 1			1 1	1			
BSB nu	umber (eg 063000) Account Number	of branch or suburb o	r town				·				
				1 1	1		1 1	1	T 1		
Name o	of Australian bank or financial institution										
1			T T T	1 1	-	· · ·	1 1			1	
	ure(s) of Transferee(s)						he Com			-	
Bondho	older 1	Bondholder 2			ac	comp	any was	hereu	nto affix	ed in	tion
						,0014411		presen		000014	
Sole Di	rector and Sole Company Secretary/	Director/Company Secretary	(delete one)								
	r (delete one)	Birotton Company Coordiany	(40.010 0.10)								
Bondho	older 3			Witn	iess						
		Bondholder 4									
D	INSTRUCTIONS										
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Signing Requirements

Individual/Joint Holders – all stockholders must sign.

Power of Attorney – should this document be signed under Power of Attorney, the grantee of such power declares that no notice of revocation thereof, by death of the grantor or otherwise, has been received and that the Power has been/will be forwarded to the Registrar for noting. If not already noted by the registry, original certified copies are required.

Deceased Estate – all executors/administrators must sign. If not already noted by the registry, send originally certified copy of probate or letters of administration to the Registry.

Company – application must be signed under Common Seal, Power of Attorney or 2 directors, a director or company secretary or, in the case of a company with sole director who is also the sole company secretary. Positions must be stated.

Witness – all witnesses must be over the age of 18, not a party to the document and be personally acquainted with the person signing the document. Where the form is executed outside of Australia it should be witnessed by a notary public.