

Section 10. How to Invest

Applications must be made on the Application Form attached to this Product Disclosure Statement.

Please complete all parts in BLOCK LETTERS.

| A | <p>APPLICATION AMOUNT</p> <p>The payment to be made on application is indicated in whole dollar amounts. Minimum initial investment is \$20,000.</p> <p>Cheque: Make your cheque payable to: “Selector Australian Equities Fund Applications Account” and crossed “Not Negotiable”.</p> <p>EFT: Contact DDH for banking details.</p> <p>Payment must be made in Australian currency. Cheques not properly drawn may be rejected. Cheques will generally be deposited on the day of receipt. Please clip or pin your cheque to the Application Form – do not use staples. We do not accept cash deposits.</p> | | |
|----------------------|---|--|--|
| B | <p>TYPE OF INVESTOR</p> <p>Please mark one of the boxes with a cross to indicate who is making the investment.</p> | | |
| C | <p>INVESTOR DETAILS AND TAX FILE NUMBER</p> <p>If you already have an investment with the Fund, please provide your account number.</p> <p>You must enter the full name(s) and title(s) of all legal entities that are to be recorded as the registered holders. Full given name, surname, date of birth and current residential address are required for individuals. The name of a beneficiary or any other non registrable name (e.g. superannuation fund name) may be included as an account name if completed as detailed in the table below.</p> <p>You may enter the TFN, exemption code or ABN (if applicable) for each Applicant. Collection of TFNs is authorised by taxation laws. It is not compulsory to provide your TFN. However, if you do not do so, tax may be deducted from your taxable distributions at the highest marginal tax rate plus levies.</p> <p>Additional information will be required in accordance with the Anti-Money Laundering & Counter-Terrorism Financing legislation. Please refer to the AML/CTF Checklist for further details on pages 42 and 43, which forms part of the Application Form.</p> | | |
| Type of investor | Instruction | Correct form | Examples of incorrect form |
| Individuals | Give full name, not initials | JOHN ANTHONY SMITH | J A Smith |
| Companies | Use company title, not abbreviations | PETER SIMPSON PTY LTD | P Simpson Co Peter Simpson P/L |
| Trusts | Use the name(s) of the trustee(s), not the name of the trust | JOHN ANTHONY SMITH <SMITH FAMILY A/C> | John Smith Family Trust |
| Partnerships | Use the personal name of the partner, not the name of the partnership | RICHARD JOHN JONES DAVID PETER JONES <RICHARD JONES & SON A/C> | Richard Jones & Son |
| Superannuation Funds | Use name(s) of trustee(s) followed by account name, not the name of the fund | MARY FIELDING PTY LTD <FIELDING SUPER FUND A/C> | Mary Fielding Pty Ltd Superannuation Fund |

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| D | CONTACT DETAILS You must provide a valid mailing address and email address (if available) for all future correspondence from us in relation to your holding in the Fund. | | |
| E | ANNUAL FINANCIAL REPORTS Complete this section if you want to receive a paper copy of the annual financial report for the Fund. | | |
| F | ONLINE PORTFOLIO VIEW Complete this section if you want to have online access to view your investment transactions and balances via the Online Portfolio View facility. | | |
| G | DISTRIBUTION PAYMENT DETAILS If you wish to have your distributions reinvested into the Fund, you need to mark the appropriate box with a cross. Alternatively, if you wish to have your distributions paid to you, provide us with details of your Australian Bank, Credit Union or Building Society account. If you do not provide us with account details, we will reinvest your distributions until such time as you provide these details. | | |
| H | DECLARATION AND SIGNING You must sign the form where indicated. If you are applying in joint names, all Applicants must sign. If you are executing the form under a power of attorney, you must attach a certified copy of the power. If you are applying in a company name, you must execute the form in accordance with the company's constitution and the Corporations Act. | | |
| I | ADVISOR DETAILS AND REMUNERATION If you are investing through a financial advisor, your advisor will complete this section. | | |
| LODGING THE APPLICATION FORM The Application Form should be addressed to: Selector Australian Equities Fund C/- DDH Graham Limited GPO Box 330 Brisbane Qld 4001 The Responsible Entity may decide to accept or reject any application at its absolute discretion. Your application may be declined or accepted in part. | | | |
| CONTACTING US <table><tr><td>Fund enquiries: Tel +61 7 3210 2277 Fax +61 7 3210 6986 Email investments@ddhgraham.com.au</td><td>In writing: Selector Australian Equities Fund C/- DDH Graham Limited GPO Box 330 Brisbane QLD 4001</td></tr></table> | | Fund enquiries: Tel +61 7 3210 2277 Fax +61 7 3210 6986 Email investments@ddhgraham.com.au | In writing: Selector Australian Equities Fund C/- DDH Graham Limited GPO Box 330 Brisbane QLD 4001 |
| Fund enquiries: Tel +61 7 3210 2277 Fax +61 7 3210 6986 Email investments@ddhgraham.com.au | In writing: Selector Australian Equities Fund C/- DDH Graham Limited GPO Box 330 Brisbane QLD 4001 | | |

This application form is part of the Product Disclosure Statement for the Selector Australian Equities Fund dated 1 September 2009. You should read the Product Disclosure Statement in full before filling in this Application Form if you want to apply for Units in the Fund. It contains important information about the Fund and investment in the Fund.

A Application Amount

We lodge full application monies: \$

- ▶ Minimum initial application amount is \$20,000.
- ▶ Additional applications in increments of \$2,000.
- ▶ Payment of application monies may be made by cheque or EFT.

B Type of investor (please X appropriate box)

Individual Joint Partnership Sole Trader Company Trust Super Fund

C Investor Details (please X appropriate box)

New Investor Existing Investor If existing investor please provide Account Number

(i) Individual / Joint / Sole Trader / Individual Trustee

Investor 1

Title Given Name Surname Date of Birth

TFN or ABN or reason for exemption

Business Name (for Sole Trader)

Investor 2

Title Given Name Surname Date of Birth

TFN or ABN or reason for exemption

(ii) Partnership (one partner must complete all details below)

Title Given Name Surname Date of Birth

TFN or ABN or reason for exemption

Partnership Name and Business Name (if applicable)

Country where established

(iii) Company / Corporate Trustee

Full Name of Company / Corporate Trustee

TFN or ABN or reason for exemption ACN

(iv) Trust / Superannuation Fund (Trustee to complete these details and either (i) or (iii) as relevant)

Full Name of Trust

TFN or ABN or reason for exemption Country where Trust is established

Partnership Name and Business Name (if applicable)

ARSN (if registered managed investment scheme) Type of Trust (i.e. Unit Trust)

D Contact details

Residential address (If a company or corporate trustee, provide registered office address)

Suburb, City or Town

State

Postcode

Country (if not Australia)

Home telephone

Telephone (Business Hours)

Mobile

Email Address

Postal address (If different to residential address)

Suburb, City or Town

State

Postcode

Country (if not Australia)

E Annual Financial Reports

Please X box if you would like to receive a hard copy of the Fund's annual financial reports.

F Online Portfolio View

Please X box if you would like online access to view your investment transactions and balances via the Online Portfolio View facility.

G Distribution payment details (please X appropriate box) If you do not make a selection, your distributions will be automatically reinvested.

Please reinvest my distributions

Please do not reinvest my distributions, and make deposits to the following account:

Financial Institution

BSB

Account Name

Account Number

H Declaration and signing

By completing, signing and lodging this application form, you agree that:

- You have read and understood the Product Disclosure Statement in full to which this Application Form relates.
- You will be bound by the Constitution of the Fund.
- You have made an offer to become an Investor in the Fund and that offer cannot be revoked.
- We may accept or reject this application in whole or in part.
- You have had the opportunity to seek independent professional advice regarding the legal, taxation and financial implications of investing in the Fund.
- You have not relied on any statements or representations made by anybody (including the Responsible Entity and its officers, employees or agents) prior to applying, other than those representations made in this Product Disclosure Statement.
- The advisor whose stamp appears on the Application Form will receive payments as detailed in the Product Disclosure Statement and indicated on the Application Form. You authorise us to give information relating to your account and investment to your advisor.
- Monies invested in the Fund do not represent an investment in or a deposit with or other liability of DDH Graham Limited and an investment is subject to investment risk, including possible delays in the repayment and loss of income and capital invested.
- You have provided your advisor or us (if applying directly) all documentation requested for AML/CTF investor identification purposes (see pages 42 and 43).
- If your investment is via a trust that is not a registered managed investment scheme or a government superannuation fund and you have not provided details of the name of each beneficiary or class of beneficiary, you certify that the trust is an unregistered managed investment scheme that only has wholesale clients and does not make small scale offerings under section 1012E of the Corporations Act.
- DDH Graham Limited will use personal information provided for the purposes of accepting the application.

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