

# Prime Value Funds - TRANSFER FORM

Use this form to transfer ownership of an investment from one investor to another.  
 Any performance fees accrued on your investment in the fund being withdrawn will be deducted at this time.  
 You can return this signed request to us by mail, fax or email.

**Mail**  
 Prime Value Asset Management Ltd  
 Level 9, 34 Queen St  
 Melbourne Vic 3000

**Fax**  
 (03) 9098 8099  
**Email**  
 admin@primevalue.com.au

**More Information**  
 (03) 9098 8088

## 1. Seller(s) details

Investor Code	<input type="text" value="HNW"/>	Contact phone number	<input type="text"/>
Account Name	<input type="text"/>		
	<input type="text"/>		

## 2. Buyer(s) details New investors must also complete an Application Form. Please contact us on: 03 9098 8088 or see primevalue.com.au

Investor Code	<input type="text" value="HNW"/>	Contact phone number	<input type="text"/>
Account Name	<input type="text"/>		
	<input type="text"/>		

## 3. Transfer details Please indicate the dollar amount or number of units you wish to transfer

Prime Value Growth Fund	<input type="checkbox"/>	Full amount	<input type="checkbox"/>	or	\$ <input type="text"/>	or	<input type="text"/>	Units
Prime Value Imputation Fund	<input type="checkbox"/>	Full amount	<input type="checkbox"/>	or	\$ <input type="text"/>	or	<input type="text"/>	Units
Prime Value Opportunities Fund	<input type="checkbox"/>	Full amount	<input type="checkbox"/>	or	\$ <input type="text"/>	or	<input type="text"/>	Units
Prime Value Emerging Opportunities Fund	<input type="checkbox"/>	Full amount	<input type="checkbox"/>	or	\$ <input type="text"/>	or	<input type="text"/>	Units
Prime Value Cash Plus Fund	<input type="checkbox"/>	Full amount	<input type="checkbox"/>	or	\$ <input type="text"/>	or	<input type="text"/>	Units
Prime Value Australian Agricultural Fund	<input type="checkbox"/>	Full amount	<input type="checkbox"/>	or	\$ <input type="text"/>	or	<input type="text"/>	Units
Prime Value Citrus Trusts	<input type="checkbox"/>	Full amount	<input type="checkbox"/>	or	\$ <input type="text"/>	or	<input type="text"/>	Units

## 4. Distribution Option

Tick the relevant box(es) to indicate how you would like your distributions paid. If no selection is made, reinvestment will be assumed.

Prime Value Growth Fund	Reinvest Distribution	<input type="checkbox"/>	or	Pay to my bank account (below)	<input type="checkbox"/>
Prime Value Imputation Fund	Reinvest Distribution	<input type="checkbox"/>	or	Pay to my bank account (below)	<input type="checkbox"/>
Prime Value Opportunities Fund	Reinvest Distribution	<input type="checkbox"/>	or	Pay to my bank account (below)	<input type="checkbox"/>
Prime Value Emerging Opportunities Fund	Reinvest Distribution	<input type="checkbox"/>	or	Pay to my bank account (below)	<input type="checkbox"/>
Prime Value Cash Plus Fund	Reinvest Distribution	<input type="checkbox"/>	or	Pay to my bank account (below)	<input type="checkbox"/>

## 5. Distribution account details

Tick if the distribution proceeds are to be paid into the bank account we have on file.

Financial Institution

Branch

BSB

Account Number

Account Name

## 6. Seller(s) Signature(s) All signatories to this account must sign this transfer form

Signature

Print Name (in full)

Tick capacity (mandatory for companies)

Sole Director

Director

Company Secretary

Date

Signature

Print Name (in full)

Tick capacity (mandatory for companies)

Director

Company Secretary

Date

## 7. Buyer(s) signature(s)

Joint applications must both sign. Applications under a Power of Attorney must be accompanied by a certified copy of the power.

In signing this form, I/we acknowledge/agree to the following:

- I/we have read and understood the Product Disclosure Statement and/or Information Memorandum for the relevant Fund;
- I/we agree to be bound by the terms of the Product Disclosure Statement and/ or Information Memorandum and the constitutions;
- I/we acknowledge that neither Prime Value nor any other person or entity guarantees the value or performance of this investment or any income or capital return from the Fund;

Signature

Print Name (in full)

Tick capacity (mandatory for companies)

Sole Director

Director

Company Secretary

Date

Signature

Print Name (in full)

Tick capacity (mandatory for companies)

Director

Company Secretary

Date