

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Any performance fees accrued on your investment in the fund being withdrawn will be deducted at this time.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
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1. Seller(s) details

Investor Code Contact phone number
Account Name

2. Buyer(s) details

New investors must also complete an Application Form. Please contact us on: 03 9098 8088 or visit www.primevalue.com.au

Investor Code Contact phone number
Account Name

3. Transfer details

Please indicate the dollar amount or number of units you wish to transfer

Prime Value Opportunities Fund	Full amount	or	\$	or	Units
Prime Value Emerging Opportunities Fund	Full amount	or	\$	or	Units
Prime Value Growth Fund	Full amount	or	\$	or	Units
Prime Value Equity Income Fund	Full amount	or	\$	or	Units
Prime Value Enhanced Income Fund	Full amount	or	\$	or	Units
Prime Value Diversified High Income Fund	Full amount	or	\$	or	Units
Prime Value Diversified High Income Plus Fund*	Full amount	or	\$	or	Units
Prime Value Dairy Trusts	Full amount	or	\$	or	Units
Prime Value Citrus Trusts	Full amount	or	\$	or	Units
Prime Value Select Mortgage Income Fund	Full amount	or	\$	or	Units
Prime Value Growth Infrastructure Fund	Full amount	or	\$	or	Units
Prime Value Private Equity Fund	Full amount	or	\$	or	Units
Prime Value Retirement Living Funds	Full amount	or	\$	or	Units
Other	Full amount	or	\$	or	Units

* Transfers only processed half yearly on 31 March or 30 September. One months prior notice is required. Refer to Information Memorandum for further details.
Initial investment minimum \$200,000.

4. Distribution Option

Prime Value Opportunities Fund	Reinvest Distribution	or	Pay to my bank account
Prime Value Emerging Opportunities Fund	Reinvest Distribution	or	Pay to my bank account
Prime Value Growth Fund	Reinvest Distribution	or	Pay to my bank account
Prime Value Equity Income Fund	Reinvest Distribution	or	Pay to my bank account
Prime Value Enhanced Income Fund	Reinvest Distribution	or	Pay to my bank account
Prime Value Diversified High Income Fund	Reinvest Distribution	or	Pay to my bank account
Prime Value Diversified High Income Plus Fund	Reinvest Distribution	or	Pay to my bank account
Prime Value Dairy Trusts			Pay to my bank account
Prime Value Citrus Trusts			Pay to my bank account
Prime Value Select Mortgage Income Fund	Reinvest Distribution	or	Pay to my bank account
Prime Value Growth Infrastructure Fund			Pay to my bank account
Prime Value Private Equity Fund		or	Pay to my bank account
Prime Value Retirement Living Funds		or	Pay to my bank account
Other	Reinvest Distribution	or	Pay to my bank account

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)

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)

Sole Director

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 or Information Memorandum for the relevant Fund;
- I/we agree to be bound by the terms of the Product Disclosure Statement or Information Memorandum and the constitution;
- 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)

Sole Director

Director

Company Secretary

Date