# **Withdrawal Request**

Please return completed form to: PO Box 78 Grafton NSW 2460 or by email to grafton@westlawn.com.au



### Please use BLOCKCAPITALS

Investor number (if known) Full account name	
2. Contact details	
Residential address (mandatory): PO Box is NOT acceptable	e Postal address details (will be used for all account correspondence)
Street address	Street address
	_
	_
Suburb State Postcode	Suburb State Postcode
Country (if not Australia)	Country (if not Australia)
Contact details: Provide at least ONE contact telephone numb	ner
Telephone (home)	
Telephone (work)	
Telephone (mobile)	
Email	
Facsimile	
Class of Units  Class 6M  Class 12M  Class 24M	Amount in \$         Units         Entire Investment           OR         OR           OR         OR           OR         OR
4. Nominated bank account details	
Please specify your nominated Australian domiciled bank a	account for receiving your redemption proceeds from the Fund
The details you hold in my records, <b>OR</b>	
	B A new Application Form is required if switching to a different Class)
	B A new Application Form is required it switching to a different class)
OR	
Name of financial institution	
Account name	
(3rd party payment	
is not acceptable)	
BSB Account Number:	

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### 5. Signatures and roles

Signature-Investor 1	Signature-Investor 2
<b>Title</b> (Director/Secretary/Sole Director/Trustee/Power of Attorney) <b>mandatory</b> *	<b>Title</b> (Director/Secretary/SoleDirector/Trustee/PowerofAttorney) mandatory*
Full name	Full name
Date signed	Date signed

#### **Signing Instructions**

- \* Individual investor: Where the investment is in one name, the investor must sign.
- \* **Jointinvestors:** Where the investment is in more than one name, all investors must sign. All subsequent instructions will require the signature of all joint investors.
- \* Corporate investor/Corporate trustee: Must sign either: (a) under seal and signed by directors; or (b) by two directors or director and company secretary; or (c) by a sole director/sole secretary (where applicable). Please state your name & role in the company beneath your signature (e.g. Director, Secretary, Sole Director).
- \* Superannuation/Trust: Each trustee must sign.
- \* Power of Attorney (POA): If signed under a POA, the POA must have been previously noted by BlackRock. If not, an originally certified copy of the POA as well as an originally certified copy of the attorney's driver's licence, passport or other photo identification which confirms their name, address and contains their signature must be attached to this form. The attorney certifies that they have not received notice of revocation of that power.
- \* **Signatory List:** Please provide a signatory list (if applicable).

Please provide certified proof of your identify and signature with your request to enable us to verify your identity as required by the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

Company Seal