BULK OFF MARKET TRANSFER REQUEST - ASX STOCKS



Important - the buyer and seller must sign both pages of this form.

SECT	ION A - Transfero	or(s) and Transfer	ee(s) to complete the below details	
Seller / From Account	Account number		HIN	
Registration Details Holder Name	s of Seller Full nam	ne(s) of Transferor(s)	
Designation				
Transferor(s) / Sell	er(s) sign here			
Signature of Investor /	Director / Trustee		Signature of Joint Investor / Director 2 / Tru	ıstee 2
		Date		Date
Name			Name	
Buyer / To Account	Account number		HIN	
Registration Details Holder Name	s of Buyer Full nam	ne(s) of Transferee((s)	
Designation				
Full postal address	of Transferee(s)			
Postal Address	()			
Postcode	State / Territory	,	Country	
Transferee(s) / Buy	ver(s) sian here			
Signature of Investor / Director / Trustee			Signature of Joint Investor / Director 2 / Tru	stee 2
		Date		Date
Name			Name	

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SECTION B - Transferor(s) and Transferee(s) to complete the below ASX Stocks to be transferred

ASX Stock Code	Name of the Security	No. of Shares	Consideration (\$AUD)	Date

Signed as per Section A:

I/We the registered holder(s) and the undersigned seller(s) for the above Consideration do herby transfer to the above name(s) hereinafter called the Buyer(s) the securities as specified above standing in my/our name(s) In the books of the above named Companies, subject to the several conditions on which I/we held the same at the time of signing hereof and I/we the Buyer(s) do herby agree to accept the said securities subject to the same conditions. I/we have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).

Transferor(s) / Seller(s) sign here			
Signature of Investor / Director / Trustee	Signature of Joint Investor / Director 2 / Trustee 2		
Transferee(s) / Buyer(s) sign here			
Signature of Investor / Director / Trustee	Signature of Joint Investor / Director 2 / Trustee 2		

Return this completed form and any supporting documents to your Financial Adviser or Nominated Adviser Representative. Alternatively, return to us by post to: Powerwrap Client Services, PO Box 16071, Collins St West VIC 8007.

This form to be used in respect of Powerwrap Investment Account ARSN 137 053 073 issued by Powerwrap Limited ("Responsible Entity", "Powerwrap") ABN 67 129 756 850. AFSL 329829.

PWL: 2024-10