



Company or Trust in which the Investment is Held

[Empty box for Company or Trust name]

Full Name (s) of Registered Holding

[Empty box for Full Name of Registered Holding]

Registered Address

[Empty box for Registered Address]

Post Code

ALL CORRESPONDENCE TO:

Advanced Share Registry Ltd
PO Box 1156, Nedlands
Western Australia 6909

110 Stirling Hwy, Nedlands
Western Australia 6009

Telephone: (08) 9389 8033
Facsimile: (08) 9262 3723

Email: admin@advancedshare.com.au
Website: www.advancedshare.com.au

Securityholder Reference Number (SRN)

[SRN grid]

Small Estate Statement and Indemnity

Uncertificated CHESS Holdings - ORIGINAL form must be forwarded to the CHESS Sponsoring Broker or Non-Broker Participant.
Uncertificated Issuer Sponsored Holdings - ORIGINAL form must be forwarded to the Issuer's Registry.

Use a black pen. Print in CAPITAL letters inside the boxes

A Small Estate Statement and Indemnity

Description of Securities (Shares, Options etc.)

[Empty box for Description of Securities]

Number of Securities held

[Empty box for Number of Securities held]

I/we do solemnly and sincerely declare I am/we are the legal representative(s) for the above deceased estate.

Full Name of Executor(s) or Administrator(s)

[Empty box for Full Name of Executor(s) or Administrator(s)]

I/we request the security issuer to permit transmission of the securities detailed above to ourselves as legal representative(s) of the estate without requiring a Grant of Probate or Letters of Administration or reseal of grant of probate to be obtained in the state of:

[Empty box for State/Territory]

(Australian State or Territory where the securities are registered)

In consideration of the security issuer registering the securities in my/our name(s) I/we hereby covenant to indemnify and forever keep indemnified the security issuer, the directors and trustees of the security issuer, the security registrar and the directors and officers of the security registrar from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs and expenses whatsoever which may be made or brought against them by reason of compliance with this request.

Contact Name

[Empty box for Contact Name]

Telephone Number - Business Hours

[Empty box for Telephone Number - Business Hours]

Telephone Number - After Hours

[Empty box for Telephone Number - After Hours]

B Sign Here - This section must be signed and witnessed for your instructions to be executed

I/We authorise you to act in accordance with my/our instructions set out above. I/we acknowledge that these instruction supersede and have priority over all previous instructions in respect to my/our securities.

All Executor(s) Administrators(s) must sign

[Empty box for Signature]

Witness

[Empty box for Witness Signature]

[Empty box for Signature]

Witness

[Empty box for Witness Signature]

[Empty box for Signature]

Witness

[Empty box for Witness Signature]

The witness(es) certifies that the person(s) who has/have signed this statement is/are known to them and has/have signed in the presence of the witness with their normal signature(s)

Day Month Year

[Empty box for Date]

Executors/Administrators: When the holding is in the name of an Estate, all Executors/Administrators are required to sign.

Power of Attorney: To sign as Power of Attorney, you must have already lodged it with the registry. Alternatively, attach a certified photocopy of the Power of Attorney to this form.

NOTE: Australian The Corporations Act 2001 imposes severe penalties for making a false statement (\$10,000 or 2 years imprisonment or both) or failing to ensure a statement is not false or misleading. (\$5,000 or 1 years imprisonment or both).

Overseas Please complete this statutory declaration in accordance with the laws of the country in which it is declared and ensure it is legally witnessed.