



Client Services contact details

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E contact@corcapital.com.au

Additional Investment Form

Cor Capital Fund

Please use this form if you are an existing investor and wish to make an additional investment.

1. Read and ensure you understand the Product Disclosure Statement (PDS) for the fund in which you are making an investment.

The PDS is available on our website www.corcapital.com.au, or from your financial adviser.

2. Please complete all sections in block capitals and using a black pen.

Please double check that you have completed the following:

- written your account number and account name as it appears on the latest periodic or transaction statements
- written the amount in Australian dollars
- ticked the standing instruction box (if applicable)
- selected the payment method you would like to use
- signed the form as per the 'signing instructions' in section 6.

3. Send your documents to us.

You can return your form by post or email according to the details below:

Send by Post: Cor Capital Fund
 GPO BOX 804
 Melbourne VIC 3001

Scan and email to: corcapital_transactions@unitregistry.com.au

4. Transfer your application money to us.

Please refer to section 4 'payment of application amount'.

1. Investor details

Account number

Account name

2. Investment details

Please specify the amount(s) you wish to invest. The minimum additional investment is AUD\$5,000 for each Trust.

Fund Name	Cor Capital Fund
ARSN	609 666 042
Investment Amount	AUD \$

3. Other instructions

If you wish to change your other instructions (such as your distribution or reporting preferences, financial adviser information, bank account, or contact details), please complete a Change of Details form, available from www.corcapital.com.au.

4. Payment of application amount

Please select your payment method and complete the relevant section if applicable. All payments must be made in AUD.

I am making my payment by:

- EFT Direct Debit
 Cheque BPAY®

EFT

Account name: SS&C Solutions ARF Cor Capital Application Account
BSB: 083-001
Account number: 677 825 266
Your reference: [please use the name of the investor]

Cheque

Please make your cheque payable to: SS&C Solutions ATF Cor Capital Fund Application Account
Please cross and write "not negotiable" on Australian cheques only.

Direct debit authority – Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

By completing and signing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and SS&C Solutions Pty Ltd, as set out in this Request and in your Direct Debit Request Service Agreement, a copy of which is available on www.ssstech.com

Financial institution name

Branch name

BSB number

Account number

Account name (no third party accounts)

I/We request and authorise SS&C Solutions Pty Ltd ABN 75 007 325 779 (User ID 411595) to arrange, through its own financial institution, a debit to the nominated account as deemed payable by SS&C Solutions.

Signature of primary bank account holder

Please print full name

Date (DD/MM/YYYY)

Signature of joint bank account holder (if applicable)

Please print full name

Date (DD/MM/YYYY)

BPAY® Telephone and Internet Banking

You can make your payment using telephone or internet banking. You will need to quote the biller code and your investor number (for reference) when making this payment. Initial applications made by BPAY® will be processed once we receive your funds. We will not issue units until we receive the money from your financial institution. Although your BPAY® transaction is processed from your financial institution account immediately, your funds may take some time to be transferred to us from your financial institution.

Fund	BPAY® Details
Cor Capital Fund	 Biller code: 384958 Reference number: [Investor Number]

5. Acknowledgements and signatures

When you apply to invest, you (the applicant) are telling us:

- you have received, read and understood the current PDS,
- monies deposited are not associated with crime, money laundering or terrorism financing, nor will monies received from your account have any such association,
- you are not bankrupt or a minor, and
- you agree to be bound by the constitution of the Fund and the PDS as supplemented, replaced or re-issued from time to time.

Signing instructions

Individual – where the investment is in one name, the account holder must sign.

Joint Holding – where the investment is in more than one name, all of the account holders must sign.

Companies – where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust – the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney – if you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document of the Power of Attorney. I/we attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

Signature of investor 1, director or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- Director
- Sole director and company secretary
- Authorised signatory

Signature of investor 2, director/company secretary or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- Director
- Sole director and company secretary
- Authorised signatory