

REDEMPTION REQUEST

| | · | | |
|--|--|--|--|
| Unit Class: | Class A – Arrow Fund | Class B – Dorado Fund | Class C – Horizon Fund |
| Amount: | | | |
| or; | | | |
| No. of Shares: | | | |
| or; | | | |
| □ Full Reder | nption | | |
| PAYMENT INS | TRUCTIONS | | |
| | | is your responsibility to ensure all payee not guarantee their recovery. We do no | |
| Please tick the | e applicable box below: | | |
| Pay to | the existing bank account held | on file. | |
| Pay to | the bank account provided belo | ow* | |
| | oceeds and/or income distribution a third-party bank account. | ons. This account must be in the name o <u></u> | f the investor. Withdrawal proceeds wi |
| Name of Bank | : | | |
| | | | |
| Account name | 2: | | |
| Account name BSB: Date:/ | »: | Account number: | |
| Account name BSB: Date:/ | e: / OF AUTHORISED SIGNATORY(IE | Account number: | |
| Account name BSB: Date:/ VERIFICATION For Individuals | e: / OF AUTHORISED SIGNATORY(IE | Account number: | |
| Account name BSB: Date:/ VERIFICATION For Individuals Signature : | 2: / OF AUTHORISED SIGNATORY(IE | Account number: S) | |
| Account name BSB: Date:/ VERIFICATION For Individuals Signature : | 2: / OF AUTHORISED SIGNATORY(IE | Account number: S) | |
| Account name BSB: Date:/ VERIFICATION For Individuals Signature : Print Name: For Entities | 2: / OF AUTHORISED SIGNATORY(IE | Account number: S) Signature : Print Name: | |
| Account name BSB: Date:/ VERIFICATION For Individuals Signature : Print Name: For Entities Signature : | 2: / OF AUTHORISED SIGNATORY(IE | Account number: Signature : Print Name: Signature : | |