## ADDITIONAL APPLICATION REQUEST

Once completed, p	lease send to:			
Apex Group Pty Lt C/- Shareholder Se P.O Box A517 Sydi		35		
Email: <u>SSG.AUS@a</u>	pexfs.com			
Fax: 02 9475 1417				
Phone: 02 7201 90	15			
Dear Apex Group,				
We would like to g	ive notice of an add	ditional application:		
Fund Name:				
Investor Name:				
Investor Number	:			
Application Amou				
 Authorised Signato	ory 1		Authorised Signatory 2	
Date:		Date:		
Please send applica	ation money to:			
Bank Name: Account Name: BSB Number: Account Number: Reference:	032-135			