

Small Estate Statement & Indemnity

PLEASE COMPLETE THIS	PLEASE COMPLETE THIS FORM USING BLOCK LETTERS AND BLACK OR BLUE PEN							
Company or Trust in which investment is held								
Full Name(s) of Registered Holding								
Registered address								
				ı		л г		
				State		Postcode		
Security Reference Number (SRN) or Holder Identification Number (HIN)								
			You are required	d to inser	t this number			
A. SMALL ESTATE STATE	EMENT & INDEMN	ITY						
Description of Securities (Shares, Options etc)					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)								
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:								
			(Australian State	or Territ	ory where the sec	urities are reg	istered)	
I/We request Shaw and Par	tners Limited ("Sha	w") to act as broker to facil	itate such transmis	ssion.				
In consideration of Shaw acting as broker to facilitate the transmission of securities and the security issuer registering the securities in my/our								
name(s) I/we hereby convenant to indemnify and forever keep indemnified Shaw, 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		Telephone number: Business Hours			Telephone number: After Hours			
B. SIGNATURE (This sect	ion <u>must</u> be signed	and witnessed for your ins	tructions to be exe	ecuted)				
I/We authorise you to act in accordance with my/our instructions set out above. I/We acknowledge that these instructions supersede and have priority over all previous instructions in respect to my/our securities.								
Signature of Executor/Admi	nistrator 1	Signature of Executor/A	Administrator 2		Signature of E	Executor/Admi	nistrator 3	
×		x			×			
Signature of Witness		Signature of Witness			Signature of \	Vitness		
×		×			×			
The Witness(es) certifies that			tement is/are know	vn to the		gned in the pr	esence of the	
witness with their normal sign	griature(s).							
	MM / YYYY							
Executors/Administrators:	When the holding	is in the name of an Estate,	all Executors/Admir	nistrators	are required to sign	n.		
Power of Attorney: To sign as Power of Attorney, you must have already lodged it with the registry. Alternatively, attach a							ed photocopy of	
NOTE Australian:	the Power of Attorney to this form. The Corporations Act 2001 imposes severe penalties for making a false statement (\$10,000 or 2 years imprisonment or both)							
Overseas:	or failing to ensure a statement is not false or misleading (\$5,000 or 1 year imprisonment or both). Please complete this statutory declaration in accordance with the laws of the country in which it is declared and ensure it is							
legally witnessed.								