

# Withdrawal Form

This form is issued by the responsible entity Trilogy Funds Management Limited ABN 59 080 383 679 AFSL 261425 (Trilogy Funds). Use this form if you wish to make a partial or full withdrawal from your investment in the Trust/Fund listed in Section 4. If you are looking to make a withdrawal from more than one investment holding, **please complete a separate form for each Trust/Fund.**

This is an editable PDF and can be completed on your computer. If you prefer to complete a printed version, please write in BLOCK letters using either a blue or black pen only. Print X in the appropriate boxes to indicate your response. Do not use whiteout on this form. If you need to correct a mistake, cross out the section to be corrected, accompanied with your full signature.

Please provide your Trilogy Funds Investor ID number and then complete all relevant sections.

## Section 1: Details of holding

Investor ID

Account Name

## Section 2: Postal Address

Street or PO Box

City, State and Postcode

Country

## Section 3: Contact details

Email

Phone

## Section 4: Trust/Fund you are lodging withdrawal for

Trilogy Monthly  
Income Trust  
ARSN 121 846 722

Trilogy Enhanced  
Income Fund  
ARSN 614 682 469

Trilogy Wholesale  
Income Fund

**Please complete a separate  
form for each Trust/Fund.**

## Section 5: Withdrawal type

Partial withdrawal  
*(please state amount of withdrawal)*

\$

Full Withdrawal

## Section 6: Payment of withdrawal proceeds

Pay to pre-nominated Australian financial institution account

Pay to Trilogy Funds Management Limited The Trustee for Trilogy Funds Applications Account **(an application form for the Trust/Fund you wish to make an investment in must be received within one month from the date this Withdrawal Form is received and processed by us).**

## Section 7: Reasons for Withdrawal

Alternative investment

Personal Reasons

Property settlement

Other

## Section 8: Investor declarations and acknowledgements - *Investor to complete*

**By signing below I/we declare that:**

- I/We have been given the opportunity to take my/our own independent personal financial advice before deciding to proceed with this withdrawal.
- I/We have not received any personal financial product advice from Trilogy Funds in making this withdrawal.
- I/We understand that this withdrawal may be processed on such date as determined by Trilogy Funds. Trilogy Funds reserves the right to not process this withdrawal for any reason.
- I/We acknowledge that this withdrawal request is subject to the terms and conditions set out in the current offer document for the relevant Trust/Fund from which the Units/Investment are being redeemed (or, in the case of a Trust where there is no current offer document, the terms and conditions which are so far as is practicable, the same as the terms and conditions as set out in the last offer document of that Trust) and the constitution/Trust Deed of that Trust/Fund (as amended) at the time of withdrawal.
- I/We instruct Trilogy Funds, in relation to a withdrawal where there has been a change of account holder information from the original application, to contact an authorised signatory on the account to confirm that the instruction we have received is authorised.
- If the withdrawal proceeds are to be paid to Trilogy Funds Management Limited The Trustee for Trilogy Funds Applications Account, then:
  - I/We have read and understood the Product Disclosure Statement (PDS) and Target Market Determination (TMD) for the relevant Trust/Fund that this withdrawal relates to.
  - I/We understand and agree to my/our withdrawal proceeds being transferred to and held as application money in an account held in the name of Trilogy Funds Management Limited as the trustee for Trilogy Funds Applications Account, in accordance with the provisions of the Corporations Act 2001.

**Signatories must sign in accordance with operating authority on the account**

<b>Signature of Investor 1</b>		<b>Signature of Investor 2 (where applicable)</b>	
<b>Date</b>		<b>Date</b>	
<b>Given name</b>	<b>Surname</b>	<b>Given name</b>	<b>Surname</b>

**How to submit your form**

**Please email or post your form and all required documents to:**

Trilogy Funds Management Limited                      investorrelations@trilogyfunds.com.au  
 GPO Box 1648,  
 BRISBANE QLD 4001

**Please contact us if you have any questions about the process.**

Phone Investor Relations on 1800 230 099 (New Zealand callers phone +800 5510 1230) or email investorrelations@trilogyfunds.com.au