

Ausbil Investment Trusts- Switch Form

Please print well within the boxes in CAPITAL LETTERS. Mark appropriate boxes with a cross like the following X
 Please send the completed Switch Form by fax to 1300 365 601 or by mail to:
 National Australia Bank Limited, Registry Services, PO BOX 1406, Melbourne VIC 3001

IMPORTANT

- The minimum switch amount is \$10,000 per Fund

Step 1: INVESTOR DETAILS

Investor number

Investor Name

Step 2: SWITCH FROM

Fund Name	Full switch	or	Amount \$	or	No. of units	or	%
Australian Active Equity Fund	<input type="checkbox"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>
Australian Geared Equity Fund	<input type="checkbox"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>
Australian Emerging Leaders Fund	<input type="checkbox"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>
Ausbil MicroCap Fund	<input type="checkbox"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>
Active Extension Fund (Retail Class)	<input type="checkbox"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>
Balanced Fund	<input type="checkbox"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>
Dexia Sustainable Global Equity Fund	<input type="checkbox"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>
Total			\$ <input type="text"/>				100%

Step 3: SWITCH TO

Fund Name	Amount \$ (each Fund)	or	%	Distribution* (Cross one box for each investment)	
				Reinvestment of Distribution	Pay Distribution to account in Step 4.
Australian Active Equity Fund	<input type="text"/>		<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Australian Geared Equity Fund	<input type="text"/>		<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Australian Emerging Leaders Fund	<input type="text"/>		<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ausbil MicroCap Fund	<input type="text"/>		<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Active Extension Fund (Retail Class)	<input type="text"/>		<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Balanced Fund	<input type="text"/>		<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dexia Sustainable Global Equity Fund	<input type="text"/>		<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total	\$ <input type="text"/>		100%		

***Your nomination will override previous nominations and will apply to all investments in that Fund, If left blank, distribution will be reinvested unless previously advised.**

Step 4. ACCOUNT DETAILS FOR DISTRIBUTION PAYMENTS

- **Bank account supplied must be in the name of the investor as we cannot pay third parties**

Select one of the following:

- Pay distributions to the bank account on file Pay distributions to the nominated bank account below

Note: Any details provided below will override any bank account details previously provided to us. Please leave blank if your preferred bank details are the same as those you have previously provided. If bank account details are changed, the completed form needs to be sent by mail to the above address. Faxed or photocopied documents will NOT be accepted.

Financial Institution Name

Branch Name

Branch Number (BSB)

Account Number

Account Name

Please note: The Responsible Entity will not issue cheques for distribution payments.

Step 5. SIGNATORIES

- **This form must be signed by all authorised signatories (e.g. For a joint account, both signatories must sign this form.)**
- Where signing under Power of Attorney, the Attorney that confirms that no notice of revocation of that power has been received. An originally certified copy of the Power of Attorney, including the appointed Power of Attorney's signature, must be lodged with this form if it has not previously been supplied.

I/We declare that:

- I/We have read and understood the current Ausbil Investment Trusts Product Disclosure Statement (PDS) to which this form applies and I/we agree to the terms contained in it and to be bound by the provisions of the current PDS, Incorporated Material and the relevant Constitution(s), each as amended from time to time.
- I/We acknowledge that a Switch is processed as a Redemption and an Application. The Funds' buy-sell spread may apply.

Name

Date

Signature

Individual Partner Director

Company Secretary Sole Director Trustee Executor Power of Attorney

Name

Date

Signature

Individual Partner Director

Company Secretary Sole Director Trustee Executor Power of Attorney

Common seal (If applicable)