ALEXANDER CREDIT INCOME FUND

ADDITIONAL INVESTMENT FORM – ALEXANDER CREDIT INCOME FUND

Additional Investment Form For Existing Investors

Please use this form if you are already an investor in the Alexander Credit Income Fund* and wish to make an additional investment. New investors should use the Alexander Credit Income Fund Application Form.

*formerly the Alexander Fixed Income Fund

INVESTOR DETAILS					
Number		Name			
Company/Fund/Super Fund I	Name				
ADDITIONAL INVESTMENT DETAILS					
Please tick the box beside your chosen payment method and complete the required details.					
Additional Investment Amo	unt				
Amount: AUD,,					
Tick to indicate how your additional investment amount will be made:					
Electronic Funds Trans	sfer or Direct Deposit				
Bank Name Account Name BSB Number Account Number	St. George Bank One Registry Services Pty Ltd Applications A 332-127 555 211 856	Account 11			

APPLICATION FORM – 9 APRIL 2021

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DECLARATION AND SIGNATURES

- I/We have read the Product Disclosure Statement (PDS) for the Fund in which I am applying for additional units.
- I/We agree to be bound by the terms and conditions of the PDS, and Constitution of the Fund in which I/we have chosen to invest. I/We declare that all details are correct.
- By signing this Application Form, I/we acknowledge that I/we have read and understood the PDS and where appropriate have obtained my/our own independent financial investment advice.
- · I/We acknowledge and agree that where Equity Trustees act as Responsible Entity (RE), in its sole discretion, determines that:
 - (a) I/We are ineligible to hold units in the Fund or have provided misleading information in my/our additional investment form; or
 - (b) I/We owe any amounts to EQT or any other person

I/we appoint the RE as my/our agent to submit a withdrawal request on my/our behalf in respect of all or part of my/our units, as the case requires, in the Fund.

I/We confirm there has been no change to investor information provided in the initial application (e.g. address details).

Signature*

Full Name

Full Name

Date

Date

Tick Capacity (mandatory for companies)

Sole Director and Company Secretary

Director

Director

Director

Secretary

Company Seal (if applicable)

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	JUILL	applicants	HIIUSL	DOLLL	21511' OI

Secretary

Company Seal (if applicable)

^{*} Company applications must be signed by two Directors, a Director and Secretary or the Sole Director and Secretary of the company; or

^{*} For trust/superannuation fund applications each individual trustee must sign.