A SELLER DETAILS — USE	E CAPITAL LETTERS			
Company/Issuer in which Investment is held				
Type of Investment (e.g., fully paid, partly paid,	units, etc.)	Number of securities to transfer		
CSN/Holder Number	Value of the transfer Gift (ti	ck) Date		
	\$ OR	/ /20		
Full Name(s) of Registered Holding				
Registered Address		Postcode		
Daytime Phone Number				
Verification Procedures – this form is subject to verification. This verification process may include contacting the Seller. Where verification cannot be carried out to the satisfaction of the Registrar, the transfer may be rejected and returned with a request to provide additional information.				
B SIGNATURE(S) OF SELL	ER(S) — ALL MUST SIGN			
The Seller(s) whose details are written above, transfers the securities shown above to the Buyer(s) and states to the Buyer(s), the Issuer of the securities and the Issuer's share registrar that they are the owner(s) of the securities and are entitled to transfer them to the Buyer(s).				
	ed copy of their drivers license or a certifi			
Investor 1 (Individual)	Joint Investor 2 (Individual)	Joint Investor 3 (Individual)		
Sole Director and Sole Company Secretary/Director (delete one)	Director/Secretary (delete one)	Director/Secretary (delete one)		
Signature of Witness	Signature of Witness	Signature of Witness		
Contact Number of Witness	Contact Number of Witness	Contact Number of Witness		



C BUYER DETAILS — USE CAPITAL LETTERS				
Full Name(s) of Buyer(s)				
Account Designation (if applicable, e.g. <j a="" c="" family="" smith="">)</j>	If the Buyer is a trust, please provide an up-to-date copy of the Trust Deed			
Buyers CSN/Holder Number (if known) PO Box / Private Bag / Care of / Property names / Building names (where applicable)	If the Buyer is a minor, please provide both a completed Minor Indemnity Statement form(s) and a certified copy of their birth certificate(s)			
Unit Number/Level Street Number Street Name				
Suburb / Town	Postcode			
Country				
Name in which your bank account is held				
Bank Details:				
	ect Credit Reference (optional)			
To enable the Company to communicate with you electronically where possible, please provide your current email address below.				
Mobile Numl	per			

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D IRD NUMBER(S) AND EXEMPTIONS — USE CAPITAL LETTERS				
Complete ONE option below, based on your investor type.				
OPTION 1 INDIVIDUAL/JOINT				
Investor 1 Name	Investor 2 Name	Investor 3 Name		
IRD Number 1	IRD Number 2	IRD Number 3		
Date of birth 1 Exempt	Date of birth 2 Exempt	Date of birth 3 Exempt		
OPTION 2 COMPANY/PARTNERSHIP/TRUST/ESTATE/MINOR				
Company Partnership Trust Es	state Minor IRD Number	Exempt		
E ELECT YOUR TAX RATE				
Tax rates apply to interest payments only.				
39%				
F SIGNATURE(S) OF BUYER(S) — ALL MUST SIGN				
All buyer(s) below must provide a certified copy of their drivers license or a certified copy of a valid passport.				
Investor 1 (Individual)	Joint Investor 2 (Individual)	Joint Investor 3 (Individual)		
Director	Director/Authorised Signatory (delete one)	Director/Authorised Signatory (delete one)		
This form should be signed by the investor. If a joint ho investor's attorney, the power of attorney must have be copy attached to this form. If executed by a company, the company's constitution and the New Zealand Compani	olding, all investors should sign. If signed by the een previously noted by the registry or a certified the form must be executed in accordance with the	Date / /20		



G CERTIFICATE O	NON-REVOCATION OF POWER	R OF ATTORNEY
Complete this section if you are act Full Name	ng on behalf of an investor(s) on this Off-Mark	et Transfer Form for whom you have Power of Attorney (POA).
Place and Country of residence	ne e	
of		
Occupation		Hereby certify that by deed dated
Full Name of person/body corp	orate which granted Power of Attorney	Date of instrument creating the POA
ı		
Place and Country of residence principal place of business of d	e of person/body corporate which granted PO/ onor and, if that is not in New Zealand, state t	A, (if donor is a body corporate, state place of registered office of the country in which the principal place of business is situated)
of		
		ransfer Form under that appointment and pursuant to the ent revoking the POA.
Signed at		
Attorney 1 Signature	Attorney 2 Signature	Date
		/ /20

Privacy Clause: MUFG Pension & Market Services (NZ) Limited advises that Section 87 of the *Companies Act 1993* requires certain information about you as an investor (including your name, address and details of the securities you hold) to be included in the public register of the Issuer in which you hold securities. Personal information is collected in order to administer your holding. If part or all of the information is not provided, then it might not be possible to administer your holding. Please note that the personal information collected may be disclosed to the Issuer in which you hold securities. You can obtain access to your personal information by contacting us at the address or telephone number shown on this form. Our privacy policy is available on our website (mpms.mufg.com).

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HOW TO COMPLETE THIS FORM

Seller Details

Company/Issuer in which investments are held

This is the actual NAME of the Company, Corporation or Trust who issued the securities being transferred/sold.

Type of Investment

This is usually Fully Paid Ordinary Shares, Partly Paid Shares, Units, Options, or Convertible Notes, etc. A separate Off Market Transfer Form must be completed for each different class of security and each different registered holding.

Seller's CSN/Holder Number

The CSN/Holder Number can be found on your Securities Transaction Statements, Dividend or Interest Payment Advices. The transfer cannot be processed without the seller's CSN/Holder Number.

Number of Securities to transfer

The number of securities being transferred (numbers only required). Please print clearly.

Consideration (Value of the transfer or sale)

The price paid by the buyer to the seller for the securities on the date of transfer/sale, or market value - to be completed if applicable.

Full registered name(s) of Seller(s)

Enter the given and last names of all investor(s) or company/corporation name shown on investor documents. A certified copy of the seller(s) drivers license or a certified copy of the seller(s) passport must be provided.

Buyer Details

Full name(s) of Buyer(s)

Enter the given and last names of the individual(s)/Trustee(s) or Company/Corporation acquiring the securities through this transfer. There is a maximum of three joint holders. Securities cannot be registered in an unincorporated trading name/business or in the name of a trust. Under Sec 92 of the *Companies Act, 1993*, securities may not be registered into the name of a Trust (unless it is a Registered Charitable Trust, and documented evidence produced to our office for noting). In the case of other trusts, securities must be registered in the name/s of the trustee/s. The word 'Trust' must not be used in any part of the registered name or address.

If transferring into an existing holding you must write the name (and address) details of the existing holding **exactly** as they currently appear on the register.

If transferring to a trust, an up-to-date certified copy of the trust deed must be provided.

If transferring to a minor, a completed minor indemnity statement form and a certified copy of the minor's birth certificate must be provided.

Buyer's CSN/Holder Number

If the buyer is an existing holder of securities in the company, their CSN/Holder Number may be entered here.

Full postal address of Buyer(s)

Insert full address including the postcode. Only one address may be recorded, irrespective of the number of buyers.

Signatures

Seller(s) and Buyer(s) Signatures and the Dates MUST be signed, circling capacity under signatures

a) **Individuals** The investor must sign in the appropriate box.

b) Joint holdings Where holdings are in two or three names, all of the investors must sign in the appropriate boxes

C) Power of Attorney registry

r of Attorney To sign as Power of Attorney (POA), you must have already lodged the Power of Attorney with the

or alternatively attach a certified photocopy of the Power of Attorney to this form.

If the registry has previously sighted the POA document, you will need to complete the Certificate of Non-

Revocation

of Power of Attorney Section.

d) Executors When the holding is in the name of an estate, all executor(s)/administrator(s) are required to sign. When

executors and beneficiaries are the same people, they will need to sign as seller and buyer. Probate

requirements must also be complied with. Refer to the Estate Pack.

e) Companies If the Seller/Buyer is a company, we require the signatures of two Directors OR a Director and Secretary OR

Sole Director and Sole Company Secretary. Please ensure you sign in the appropriate boxes and circle your

capacity.

f) **Minors** If you are signing on behalf of a Minor, please refer to the Minor(s) Indemnity Form for further instructions.

Note: Copies of documents forwarded must be **certified as a correct copy** by an authorised person who has the power to witness a statutory declaration. Any form or document that does not meet the company or trust's requirements will be returned without processing.



