

All correspondence to:
Computershare Investor Services Pty Limited
GPO Box 2975 Melbourne
Victoria 3001 Australia
Enquiries (within Australia) 1300 727 620
(outside Australia) 61 3 9415 4388
Facsimile 61 8 8236 2305
web.queries@computershare.com.au
www.computershare.com

Please write your name & address details in this box:-

Please write your SRN/HIN in this box:-

Distribution Reinvestment Plan

Use a **black pen**.
Print in **CAPITAL** letters
inside the grey areas.

A B C

1 2 3

Where a choice is required,
mark the box with an 'X'

X

A **Distribution Reinvestment Plan (DRP)**

ALL Please mark this box with an 'X' if you wish all your securities to participate in the company's DRP.

OR

PART Specify the percentage of securities you wish to participate in the company's DRP. %

B **Sign Here - This section must be signed for your instructions to be executed.**

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. Where I/we have indicated participation in the Distribution Reinvestment Plan, I/we hereby agree to be bound by the Terms and Conditions of the Distribution Reinvestment Plan.

Individual or Securityholder 1 **Securityholder 2** **Securityholder 3**

Director **Director/Company Secretary** **Sole Director and Sole Company Secretary**

Date - Day **Month** **Year**

/ /

Note: When signed under Power of Attorney, the attorney states that they have not received a notice of revocation. Computershare Investor Services Pty Limited needs to sight a certified copy of the Power of Attorney.

DI018



How to complete this form

A Distribution Reinvestment Plan (DRP)

Complete this section if you wish to have your cash distributions reinvested in the form of more company securities.

If you wish to reinvest part of your securities in the company's DRP, please show percentage of your securityholding that you wish to participate.

Please note that an election to participate fully in the Distribution Reinvestment Plan will override any instruction on the registry record regarding direct payment of cash distributions into a nominated account.

This instruction only applies to the specific holding identified by the SRN/HIN and the name appearing on the front of this form.

B Signature(s)

If you have chosen to have your cash distributions fully or partially reinvested into company securities and you have completed Section A, you must sign this form as follows in the spaces provided:-

Joint Holding: where the holding is in more than one name, all of the securityholders must sign.

Power of Attorney: to sign under Power of Attorney, you must have already lodged this document with the registry. If you have not previously lodged this document for notation, please attach a certified photocopy of the Power of Attorney to this form when you return it.

Companies: where the company has a Sole Director who is also the Sole Company Secretary, this form must be signed by that person. If the Company (pursuant to section 204A of the Corporations Act 2001) does not have a Company Secretary, a Sole Director can also sign alone. Otherwise this form must be signed by a Director jointly with either another Director or a Company Secretary. Please indicate the office held by signing in the appropriate place.

DI018

AGJ

Please return the completed form in the envelope provided, or to the address opposite:

Computershare Investor Services Pty Limited
GPO Box 2975
Melbourne VIC 3001
Australia

