

# THE WESTFERRY TRUST REDEMPTION FORM

Name of Entity: \_\_\_\_\_

Bank Account Details: (for payment of distributions)      Account Name: \_\_\_\_\_  
BSB No: \_\_\_\_\_  
Account No: \_\_\_\_\_

No. of Units to be redeemed: \_\_\_\_\_

*The Trustee is not required to process this application until four weeks after receipt, though may do so earlier at its discretion with the agreement of the applicant. The amount per unit to be distributed will be the unit price of the fund 28 days after receipt of this notice less 1%. If redemption is made at an earlier date the amount to be distributed per unit will be the unit price on the day of distribution less 1%.*

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name and Position: \_\_\_\_\_

