ADDITIONAL INVESTMENT FORM – REALM GLOBAL HIGH INCOME FUND AUD

Additional Investment Form for Existing Investors

Please use this form if you are already an investor in the Realm Global High Income Fund AUD and wish to make an additional investment. New investors should complete a new Application Form.

INVESTOR DETAILS		
Number	Name	
Company/Fund/Super Fund Name		
ADDITIONAL INVESTMENT DETAILS		
I/we apply to make an additional investment in the Realm Global High Income Fund AUD.		
Class of Units		
Please select the class of Units you wish to acquire.		
Ordinary Units Amount: AUD \$		
The minimum additional investment amount must be at least AUD \$5,000.		
Please tick the box beside your chosen payment method and complete the required details.		
Cheque Made payable to: Boardroom Pty Ltd – GHIF AUD Application Account		
Electronic Funds Transfer or Direct Deposit		
Bank: St George Bank Reference: 'Investor surname/company or trust name' (as applicable)		
Account Name: Boardroom Pty Limited ITF Realm GHIF AUD Applications		
BSB: 332-027 Account number: 55-609-3724		
Date of Transfer Reference Used		
Direct Debit Request		
Please complete Section 14 of this Application Form.		
Please note funds will be applied three business days after	the request has been completed.	
INVESTOR CONFIRMATIONS		
I/we declare that all details provided in this application and previous applications, including beneficial ownership remain true		
and correct and I/we undertake to inform you of any chan		
I/we acknowledge that between the date of my/our first investment and the date of this additional investment, the Fund's		
circumstances and target market may have changed. I/we confirm I/we have read the Fund's latest PDS, all supplemental information and TMD for the Fund prior to making this additional investment and consider my/our objectives, financial		
situation and needs have not materially changed since my,		
Signature 1*	Signature 2*	
Full Manage	Full Name	
Full Name	Full Name	
Date	L Date	
Date	Date	
Tick capacity (mandatory for companies):	Tick capacity (mandatory for companies):	
Sole Director and Company Secretary	Sole Director and Company Secretary	
Director	Director	
Secretary	Secretary	
Company Seal (if applicable)		
	*Joint applicants must both sign; *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.	

ACCOUNTANT'S CERTIFICATE THAT CLIENT IS WHOLESALE UNDER SECTION 761G(7) OF THE CORPORATIONS ACT

The following section is only required for Australian Applicants who are investing less than AUD \$500,000.

I certify that:

Full Legal Name of Person (Individual or Company)

- has net assets of at least AUD \$2.5 million; or
- a gross income for each of the last 2 financial years of at least AUD \$250,000 per year.

Controlled companies/and or trusts		
It is also confirmed for the purposes of the Corporations Act the	e above named person controls the following companies and trusts:	
Full Name of Company/Trust	ABN/ACN/ARBN (if any)	
Full Name of Company/Trust	ABN/ACN/ARBN (if any)	
Full Name of Company/Trust	ABN/ACN/ARBN (if any)	
I confirm that I am a member of one or more of the following \boldsymbol{p}	rofessional bodies (tick appropriate box):	
CPA Australia ("CPA" or "FCPA"); or		
Institute of Chartered Accountants in Australia ("CA", "AC	CA" or "FCA"); or	
The National Institute of Accountants in Australia ("PNA",	, "FPNA", "FINA" or "MNIA"); or	
Other foreign eligible professional body for the purposes	of the Corporations Act (please specify)	
and I have at least 3 years practical experience as an accommodate country of qualification, not being Australia	ountant or auditor and I am giving this certificate in respect of my	
I am subject to and in compliance with the professional body's continuing education requirements.		
I am aware that the Issuer, and any subsidiary of the Issue by the Corporations Act.	er may rely on this certificate for such period of time as is permitted	
I confirm that I am independent of the above-named per	son and/or entities.	
Signature of Accountant	Business Address	
Name of Accountant	L Name of Firm	
Date		

Guidance Notes of completing the Wholesale Client Certificate:

Certification date is no more than 2-years-old.

In determining the net assets of the person, the net assets of a company or trust controlled by the person may be included in the calculations.

In determining the gross income of the person, the gross income of a company or trust controlled by the person may be included in the calculations.

Refer section 708(8)(d) and section 761G(7). For this purpose "control" has the meaning given to it in section 50AA of the Corporations Act 2001 and, in general, means having the capacity to determine the outcome of decisions about the relevant company's or trust's financial and operating policies.

A list of approved foreign eligible professional bodies is listed by ASIC at:

http://www.asic.gov.au/asic/asic.nsf/byheadline/Certificates+issued+by+a+qualified+accountant?openDocument