

# Transmission Application

Please return this form to the registrar of the issuer

1. Company, Trust, Warrant or Product in which investment is held

2. Security Reference Number (SRN), Holder Identification Number (HIN) or Share Certificate Number

## A TRANSMISSION APPLICATION

**Please complete this form in BLACK INK using capital letters. Photocopies will not be accepted.**

3. Type of Security (e.g. fully paid, partly paid, stapled security, etc.)

4. Name of Deceased (Given Name(s))

Last Name

I/We claiming to be legal personal representative(s) of the above named deceased in respect of such security described above do hereby apply to be registered as the holder(s) of such security as described above in the above named company.

I/We agree to take and hold the said holding of the type of security as described above subject to the several conditions on which the above named deceased held the same. I/We give notice that my/our name(s) and address is/are notified below and request the same be entered into the register of the above named company.

5. Title and Full Name(s) of Executor(s) or Administrator(s)

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

6. Address for Notices, Dividends etc.

PO Box/RMB/Locked Bag/Care of (c/-)/Property name/Building name (if applicable)

Unit Number/Level

Street Number

Street Name

Suburb/Town

State

Post Code

## B SIGNATURE(S) OF EXECUTOR(S)/ADMINISTRATOR(S)-THIS MUST BE COMPLETED

Executor/Administrator

Executor/Administrator

Executor/Administrator

### Instructions

1. This form is to be used when removing the shares from the name of the deceased to the Executor(s)/Administrator(s) of the estate.
2. Where the Executor(s)/Administrator(s) of the estate are also the sole beneficiaries a standard transfer form must be completed.
3. There is no requirement to formally register the securities in the name of the Executor(s)/Administrator(s) prior to selling the securities.

Date

## C HOW TO COMPLETE THIS FORM

### A Transmission application

Enter the following in the spaces provided.

Complete the full name(s) of all Executor(s)/Administrator(s) and one address.

1. The full name of the company in which the securities are held.
2. The Shareholder Reference Number (SRN, starts with "I").
3. A brief description of the type of security e.g. fully paid; stapled security etc.
4. The name of the deceased holder.
5. The title(s) and full name(s) of the Executor(s) or Administrator(s).
6. The address details to be entered on the register. Please note that only one address can be recorded. This should be the address for the delivery of all future correspondence.

**Important notice: If the holding is a broker sponsored holding in CHESSE, do not send this completed form to registrar. You must contact the sponsoring broker to lodge a Transmission Application.**

**B Signature** – All Executor(s)/Administrator(s) must sign.