

DDH Managed Funds Authorised Representative Form



Complete this form if you wish to appoint another person with the required legal capacity to act as your legal representative and to operate investments on your behalf. You may cancel this appointment at any time by providing DDH Graham Limited notice in writing.

Please complete form using CAPITAL letters. Complete ALL sections.

1 DDH Graham Limited investor details

Account number

Contact name

Contact number ()

If you wish to change your contact details please complete the 'Change of Details Form'.

2 Details of Authorised Representative

Authorised Representative 1

Capacity Individual Joint -1 On behalf of partnership Trustee Adult for child under 18
 On behalf of deceased estate Club, charity, church or other unincorporated body

Title

Surname

First names

Date of birth D D M M Y Y Y Y

Residential address

State Postcode

Home phone () Work phone ()

Email address

Postal address*

State Postcode

*If different to residential address above

Relationship to investor (optional)

Authorised Representative Form continued

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Details of Authorised Representative continued

Authorised Representative 2

Capacity	<input type="checkbox"/> Joint -2	<input type="checkbox"/> On behalf of partnership	<input type="checkbox"/> Trustee	<input type="checkbox"/> Adult for child under 18				
	<input type="checkbox"/> On behalf of deceased estate	<input type="checkbox"/> Club, charity, church or other unincorporated body						
Title	First names							
Surname								
Date of birth	D	D	M	M	Y	Y	Y	Y
Residential address					State	Postcode		
Home phone	()	Work phone		()		
Email address								
Postal address*					State	Postcode		
	*If different to residential address above							
Relationship to investor (optional)								

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Account operating instructions (optional)

If you have nominated two authorised representatives, please tick (✓) the applicable operating instructions:

- Either to sign on my behalf
- Both must sign on my behalf

Unless operating instructions are specified, all representatives must sign.

- The above persons are in addition to the existing authorised representatives
- The above persons replace the existing authorised representatives who are no longer authorised to operate this account

Unless you indicate otherwise, we will assume that the authorised representatives nominated are in addition to any other authorised representatives you have nominated previously.

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Declaration

I/We authorise the above named person(s) to act on my/our behalf to operate my/our investments with DDH Graham Limited. The authorised person(s) can do everything an investor can do, except appoint another authorised representative. I/We are aware that I/We are responsible for the actions of the authorised representative(s). I/We also release, discharge and agree to indemnify DDH Graham Limited and the funds for any losses, liabilities, actions, proceedings, accounts, claims and demands in respect of any liabilities arising out of this respect. This arrangement will continue until I/we cancel it by notifying DDH Graham Limited in writing. The cancellation will take effect from the date of receipt by DDH Graham Limited.

Authorised Representative Form continued

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Authorised signatories ALL EXISTING AND NEW SIGNATORIES MUST COMPLETE THIS SECTION

(a) Signature(s) existing

1st Individual applicant OR director OR office bearer (company signatories must include their company title)

Capacity (if company)	<input type="checkbox"/> Director	<input type="checkbox"/> Sole director and sole secretary						
Signature	SIGN HERE							
Full name	Date signed							
	D	D	M	M	Y	Y	Y	Y

2nd Joint individual applicant OR director/secretary OR office bearer (company signatories must include their company title)

Capacity (if company)	<input type="checkbox"/> Director	<input type="checkbox"/> Secretary						
Signature	SIGN HERE							
Full name	Date signed							
	D	D	M	M	Y	Y	Y	Y

- Companies signing by duly authorised representatives must provide appropriate documentation showing the proper appointment of the representatives to DDH Graham Limited.
- If signed under Power of Attorney, the attorney hereby certifies that no notice of revocation of that power has been received by the attorney.
- Applications by clubs, charities, churches or unincorporated bodies must be signed by the authorised office bearers (e.g. A. Smith - President) and a copy of the Constitution/Rules attached.

(b) Signature(s) new authorised representatives

1st Authorised representative (company signatories must include their company title)

Capacity (if company)	<input type="checkbox"/> Director	<input type="checkbox"/> Sole director and sole secretary						
Signature	SIGN HERE							
Full name	Date signed							
	D	D	M	M	Y	Y	Y	Y

2nd Authorised representative (company signatories must include their company title)

Capacity (if company)	<input type="checkbox"/> Director	<input type="checkbox"/> Secretary						
Signature	SIGN HERE							
Full name	Date signed							
	D	D	M	M	Y	Y	Y	Y

- Companies signing by duly authorised representatives must provide appropriate documentation showing the proper appointment of the representatives to DDH Graham Limited.
- If signed under Power of Attorney, the attorney hereby certifies that no notice of revocation of that power has been received by the attorney.
- Applications by clubs, charities, churches or unincorporated bodies must be signed by the authorised office bearers (e.g. A. Smith - President) and a copy of the Constitution/Rules attached.

Return your completed Authorised Representative Form to:

DDH Graham Limited
Reply Paid 330
Brisbane QLD 4001