

REDEMPTION REQUEST FORM

Please complete the table below.

Note, there is a minimum redemption request amount of \$100,000. Further, if this request results in you holding less than the minimum holding amount, we may treat this request as being a redemption request for all of your units.

Fund	Withdrawal		Please Complete Either a Dollar Amount <u>or</u> No. of Units For Partial Redemptions		Redemption Frequency and Cut-Off Times
	Full	Part	\$ Amount	No. of Units	
NWQ Titan Eclipse Fund	<input type="checkbox"/>	<input type="checkbox"/>			Quarterly, 70 days prior notice

This two (2) page form should be used for redemption requests only.

Please send a copy of the Redemption Request Form to:

Shareholder Services Group – Apex Fund Services (Sydney) Pty Ltd

PO Box A517

Sydney South NSW 1235

Tel: +61 2 7201 9015

Fax: +61 2 9475 1417

Email: ssg.aus@apexfs.com

Investor Name:	
Investor ID Number:	

Note:

- Redemption request must be received by the Administrator by 4:00pm AEST at least seventy (70) days prior to the Redemption Day. Any redemption request received after this time will be treated as a redemption request for the next Redemption Day.
- Payment of redemption proceeds will only be made to the account registered with the Administrator.
- A Full redemption request requires the original executed copy of this Redemption Request to be sent to the Administrator. Partial Redemption Requests do not require an original to be posted to the Administrator.

DECLARATION

I/We apply to NWQ Capital Management Pty. Ltd (and any Administrator appointed by NWQ Capital Management Pty. Ltd) to redeem my/our units in accordance with the completed instructions set out above.

SIGNATURES

Joint applicants must both sign. For Individual Trustee Trust/Superannuation Funds each individual Trustee must sign. For Corporate Trustee Trust/Superannuation Funds 2 Directors, a Directory and Secretary or Sole Director must sign.

INVESTOR 1

Name of individual/entity

Capacity (e.g. Director, Secretary, Authorised Signatory)

Signature

Date

INVESTOR 2

Name of individual/entity

Capacity (e.g. Director, Secretary, Authorised Signatory)

Signature

Date

Affix company seal (if applicable). Companies to sign in accordance with their constitution and the law.