

# ADDITIONAL INDIVIDUAL TRUSTEE FORM

This form is to provide TrilogY Funds with details of the additional individual trustees of your Trust.

My 5 digit Investor ID is (leave blank if you are a new Investor):

Superannuation Fund / Trust

Full name of Superannuation Fund/Trust:

Trustee 1 and Trustee 2 should be specified in your original application form. There is provision in this form to name up to 2 additional Trustees, starting with Trustee 3.

## Trustee 3

Title  Given name(s)  Surname

Date of Birth  /  /

**Residential address** (The address provided below must be the residence of the Trustee)

Street   
Suburb  State  Postcode   
Country

**Mailing address**

Please tick if your mailing address is the same as your residential address:  **OR** complete this section.

Street / PO Box   
Suburb  State  Postcode   
Country

**Contact phone number(s) and email** (Please supply at least 1 contact phone number and an email address)

Home  Business   
Mobile  Fax   
Email

**Signature**

Given name(s)  Surname   
Signature  Date  /  /

Trustee 4

Title  Given name(s)  Surname

Date of Birth  /  /

**Residential address** *(The address provided below must be the residence of the Trustee)*

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Suburb  State  Postcode

Country

**Mailing address**

Please tick if your mailing address is the same as your residential address:  **OR** complete this section.

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Suburb  State  Postcode

Country

**Contact phone number(s) and email** *(Please supply at least 1 contact phone number and an email address)*

Home  Business

Mobile  Fax

Email

**Signature**

Given name(s)  Surname

Signature  Date  /  /

**Attach this form to your application.**

**Free post** your application to:  
Trilogy Funds Management Limited  
Reply Paid 1648 | Brisbane QLD 4001

**Scan and email** to:  
investorrelations@trilogyfunds.com.au

**Please contact us if you have any questions.**

Phone Investor Relations on 1800 230 099 or email investorrelations@trilogyfunds.com.au.