

Company or Trust in which Investment is Held

**Full Name(s)
of Registered
Holding**

**Registered
Address**

Post Code

All correspondence and enquiries to:

BoardRoom

Smart Business Solutions
GPO Box 3993

Sydney NSW 2001

Tel: 1300 737 760 (within Aust)

Tel: + 61 2 9290 9600 (outside Aust)

Fax: + 61 2 9279 0664

www.boardroomlimited.com.au

enquiries@boardroomlimited.com.au

Reference Number

You are required to insert this number

Certificate Replacement Request

Statutory Declaration and Statement Pursuant to Section 1070D of the Corporations Act 2001

Use a **black pen**. Print in **CAPITAL** letters inside the boxes

A Replacement of Certificate

I/we do solemnly and sincerely declare I am/we are the registered holder(s) of certificate(s) covering:

Description of Securities
(Shares, Options etc.)

Number of
Securities held

Which has/have been lost or destroyed and has not/have not been pledged, sold or otherwise disposed of. All proper searches have been made for the certificate(s) and if ever found or received by me/us I/we undertake to immediately return the certificate(s) to the security issuer for cancellation

Certificate Number

Number of Securities

Certificate Number

Number of Securities

I/We request the issue of a replacement certificate and in consideration hereby covenant hereby covenant to indemnified and forever keep indemnified the security issuer, the directors and trustees of the security issuer, Boardroom Pty Limited and the directors and officers of Boardroom Pty Limited from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs and expenses whatsoever which may be made or brought against them by reason of compliance with this request.

Contact Name

Telephone Number - Business Hours

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Telephone Number - After Hours

 ()

B Sign Here – This section must be signed for your instructions to be executed

I/We authorise you to act in accordance with my/our instructions set out above.

Individual 1

Individual 2

Individual 3

Witness to Signature 1

Witness to Signature 2

Witness to Signature 3

The witness(es) certifies that the person(s) who has/have signed this statement is/are known to them and has/have signed in the presence of the witness with their normal signatur(e)s

Day Month Year

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