

# Redemption Form

Investor number:											
Investor name:											
Fund name:	<table border="0"> <tr> <td>Equities Fund</td> <td><input type="checkbox"/> weekly</td> </tr> <tr> <td>Charitable Equities Fund</td> <td><input type="checkbox"/> weekly</td> </tr> <tr> <td>Income Fund</td> <td><input type="checkbox"/> weekly</td> </tr> <tr> <td>Pooled Super Trust- Accumulation units</td> <td><input type="checkbox"/> weekly</td> </tr> <tr> <td>Pooled Super Trust- Pension units</td> <td><input type="checkbox"/> monthly</td> </tr> </table>	Equities Fund	<input type="checkbox"/> weekly	Charitable Equities Fund	<input type="checkbox"/> weekly	Income Fund	<input type="checkbox"/> weekly	Pooled Super Trust- Accumulation units	<input type="checkbox"/> weekly	Pooled Super Trust- Pension units	<input type="checkbox"/> monthly
Equities Fund	<input type="checkbox"/> weekly										
Charitable Equities Fund	<input type="checkbox"/> weekly										
Income Fund	<input type="checkbox"/> weekly										
Pooled Super Trust- Accumulation units	<input type="checkbox"/> weekly										
Pooled Super Trust- Pension units	<input type="checkbox"/> monthly										
Redemption amount: (specify units or dollars)											

<b>Bank account details</b>	
Account name:	
Bank:	
BSB:	
Account number:	

Authorised signatories:	
Date:	

**Please mail the original form to:**

Kaplan Funds Management  
 Suite 607 180 Ocean Street  
 Edgecliff NSW 2027