

Redemption Form

Investor number:	
Investor name:	
Fund name:	<u>Redemption</u> <u>Period</u> KFM Income Fund <input type="checkbox"/> Daily (APIR: VEN0007AU)
Redemption amount: (specify units or dollars)	

Bank account details	
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

Or email the scanned form to: enquiries@kaplanfunds.com.au