



# Challenger Absolute Return Global Bond Strategies Fund

## Withdrawal Request Form

PLEASE USE BLOCK LETTERS AND BLACK INK TO COMPLETE THIS FORM

SEND YOUR COMPLETED FORM TO:

Challenger  
Reply Paid 3698  
Sydney NSW 2001  
(no stamp required)

**Investor Services team** 13 35 66  
+612 9994 7000 (if calling outside Australia)  
8.00am to 6.00pm Monday to Friday (Sydney time)

- Your completed instructions must be received by us by 3.00pm on a Sydney business day to receive that day's withdrawal price. If your completed instruction is received after 3.00pm on a Sydney business day you will generally receive the effective price for the next business day.
- Generally, withdrawal proceeds will be available within six business days given normal operating conditions, however we do not guarantee this timeframe. Please refer to the relevant Product Disclosure Statement for more information on processing withdrawals.

### 1. Investor details

Account name

Account number

### 2. Withdrawal details (select one option only)

Full withdrawal

Partial withdrawal

\$

or

Units

### 3. Payment instructions

Direct credit  to the account we have on file or to the account in section 4.

By cheque  payable to investor(s) and mailed to the address on file.

By cheque  payable to third party – please provide details below.

Payee name

C/- (if applicable)

Unit  Street number  PO Box

Street name

Suburb  State

Postcode  Country





#### 4. Account details

Complete this section if you wish to change your bank account details to which we pay withdrawal. To change bank account details, we must receive the original, signed request and will not accept new bank account details via fax, telephone or email. Providing your new account details in this section overrides any previous bank account details provided. Any account nominated must be an accessible account with an Australian financial institution.

Institution

Branch

Account name

Branch number (BSB) - Account number

#### 5. Signatures

This form must be signed in accordance with the current signing instructions on file. Where signing under Power of Attorney, the attorney confirms that no notice of revocation of that power has been received. An original certified copy of the Power of Attorney, including the appointed Power of Attorney's signature, must be lodged with this form if it has not previously been supplied.

Signature  Date / /

Surname

Given name

Capacity  Sole Director  Director  Secretary (company investments only)

FOR COMPANY INVESTMENTS ONLY

  

Signature  Date / /

Surname

Given name

Capacity  Director  Secretary (company investments only)

Please refer to the relevant Product Disclosure Statement regarding withdrawing your investment.

This form must be signed in accordance with the current signing instructions on file. Where signing under Power of Attorney, the attorney confirms that no notice of revocation of that power has been received. An original certified copy of the Power of Attorney, including the appointed Power of Attorney's signature, must be lodged with this form if it has not previously been supplied.

The personal information we collect on this form will be used to update your personal information and/or process your request. This information may be disclosed to other members of Challenger Limited and its related bodies corporate, service providers who do things on our behalf (e.g. mailing house) or to other third parties where it is required or allowed by law or where you have otherwise consented. You can access the personal information we have collected, if we have retained it, by calling us on 13 51 53.

Fidante Partners Limited (ABN 94 002 835 592, AFSL 234668).

