

Change of Financial Adviser form Please complete the following sections

Client details				
Name Residential address				
		0	5	
Telephone		State Mobile No.	Postcode	
Email address Client/ Account number		WODIE NO.		
Name of Fund(s)				
Instructions	/we am/are writing to ensure that you please undate yo	our records to reflect the fol	lowing change of adviser	
		our records to reflect the fol	lowing change of adviser	
	I/we am/are writing to ensure that you please update yo er My Adviser/Broker is	our records to reflect the fol	lowing change of adviser	
New Broker/Advis	er	our records to reflect the fol	lowing change of adviser	
New Broker/Advis	er	our records to reflect the fol	lowing change of adviser	
New Broker/Advis Adviser name Rep Code	er	our records to reflect the fol	lowing change of adviser	
New Broker/Advis Adviser name Rep Code	er My Adviser/Broker is	our records to reflect the fol	lowing change of adviser	
New Broker/Adviser Adviser name Rep Code Dealer Group	er My Adviser/Broker is		lowing change of adviser	
Adviser name Rep Code Dealer Group Telephone	er My Adviser/Broker is		lowing change of adviser	
Adviser name Rep Code Dealer Group Telephone	er My Adviser/Broker is		lowing change of adviser	

Please return your completed form to:

Investor Services team GPO Box 764 Melbourne VIC 3001

Signature

Full name

If you require any further information please contact our **Investor Services team** on **1800 034 494** (Australia only) or **+61 3 9002 1980** or email your enquiry to **ist@yarracm.com**.

Date signed

© 2025 Yarra Capital Management Group. All rights reserved.

This form is issued by Yarra Funds Management Limited ABN 63 005 885 567 AFSL 230 251.