

Redemption Form

| | | | | | |
|--|--|-------------------|---------------|--------------------------------------|--------------------------------|
| Investor number: | | | | | |
| Investor name: | | | | | |
| Fund name: | <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><u>Redemption</u></td> <td style="width: 40%;"><u>Period</u></td> </tr> <tr> <td>KFM Income Fund (APIR: VEN0007AU)</td> <td><input type="checkbox"/> Daily</td> </tr> </table> | <u>Redemption</u> | <u>Period</u> | KFM Income Fund (APIR: VEN0007AU) | <input type="checkbox"/> Daily |
| <u>Redemption</u> | <u>Period</u> | | | | |
| KFM Income Fund (APIR: VEN0007AU) | <input type="checkbox"/> Daily | | | | |
| 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