

CHANGE OF MEMBERS DETAILS FORM

SHAKESPEARE HANEY PREMIUM INCOME FUND
ARSN 106 223 483
P O Box 1242 Surfers Paradise QLD 4217

We hereby wish to advise of the following change of details as indicated below.

DATE: _____ INVESTOR NO: _____

NAME: _____

NEW ADDRESS: _____

NEW CONTACT NUMBER: _____ (_____) _____

OLD ADDRESS: _____

CHANGE OF DEPOSIT DETAILS (Please mark appropriate box)

New account details : Bank _____ BSB _____ Account No _____

Old account details : Bank _____ BSB _____ Account No _____

SIGNATURE:
