

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. _____

NEW NAME: _____

OLD NAME: _____

ADDRESS : _____

CHANGE OF DEPOSIT DETAILS (Please mark appropriate box)

New account details : Bank _____ BSB _____ Account No _____

Old account details : Bank _____ BSB _____ Account No _____

SIGNATURE:

(OLD SIGNATURE / NAME)

(NEW SIGNATURE / NAME)