



CPT Manager Limited
Responsible Entity
ABN 37 054 494 307

Centro MCS
DIRECT PROPERTY

Centro MCS Manager Limited
Responsible Entity
ABN 69 051 908 984

All Registry communications to:
Centro Investor Services
Corporate Offices 3rd Floor
Centro The Glen
235 Springvale Road
Glen Waverley Victoria 3150
Telephone: 1800 802 400
Facsimile: 03 8847 1868
Email: investor@centro.com.au
Website: www.centro.com.au

Full Name(s) of Registered Holding

Account Designation

Registered Address

Postcode

**Securityholder Reference Number (SRN)
Or Holder Identification Number (HIN)**

A

REQUEST FOR DIRECT CREDIT OF PAYMENTS - NEW ZEALAND

PLEASE COMPLETE THIS FORM IN BLACK INK USING CAPITAL LETTERS. PHOTOCOPIES WILL NOT BE ACCEPTED.

Insert details of your New Zealand financial institution, branch and account into which you wish to have your payments made. This request will not cancel any reinvestment plan participation (if any) unless we receive specific instructions from you.

Some of the benefits of this facility for Securityholders are:

- Payments are not subject to postal delays; and
- The risk of loss or theft of cheques is removed

A direct credit request form is required for each holding.

Link Market Services Limited advises that Chapter 2C of the *Corporations Act 2001* requires information about you as a securityholder (including your name, address and details of the securities you hold) to be included in the public register of the entity in which you hold securities. Information is collected to administer your securityholding and if some or all of the information is not collected then it might not be possible to administer your securityholding. Your personal information may be disclosed to the entity in which you hold securities. You can obtain access to your personal information by contacting us at the address or telephone number shown on this form. Our privacy policy is available on our website (www.linkmarketservices.com.au).

Name(s) in which your account is held

BSB Number

Account Number

Suffix

Name of Financial Institution

Branch Suburb/Town

B

SIGNATURE OF SECURITYHOLDERS – THIS MUST BE COMPLETED

Securityholder 1 (Individual)

Joint Securityholder 2 (Individual)

Joint Securityholder 3 (Individual)

Sole Director and Sole Company Secretary

Director/Company Secretary (delete one)

Director

This form should be signed by the securityholder. If a joint holding, all securityholders should sign. If signed by the securityholder's attorney, the power of attorney must have been previously noted by the registry or a certified copy attached to this form. If executed by a company, the form must be executed in accordance with the securityholder's constitution and the *Corporations Act 2001* (Cwlth).



Date

