

CHANGE OF REGISTRATION DETAILS

To: HSBC Transfer Agency
3/F Tower 2 & 3, HSBC Centre, 1 Sham Mong Road
Kowloon, Hong Kong

Fax: +852 3409 1079

Tel: +852 2269 2570

Please complete this form in block capitals and black ink.

Account Name : _____

Account No. _____ Telephone _____

I/ We* hereby notify you of the following changes:

1. Change of Contact Details	
<i>If the new Address involves a change of country, please fill in Section 3</i>	
<input type="checkbox"/> Residential Address*	
<input type="checkbox"/> Correspondence Address	
<input type="checkbox"/> Same as Residential Address above <input type="checkbox"/> Other _____	
<input type="checkbox"/> Other Contact Details	
Tel. no. _____	Mobile No. _____
Fax No. _____	Email _____

* A PO Box address will not be accepted for the purposes of registration. Please provide an original or a certified copy of the updated residential address proof (utility bills or bank statement issued within the latest 3 months).

2. Standing Payment Instruction	
<input type="checkbox"/> Both	<input type="checkbox"/> Redemption Proceeds
<input type="checkbox"/> Income Distribution** (For Distribution Shares Only)	
Beneficiary ^ _____	
Bank Name and Branch _____	
Bank Account No. / IBAN No. _____	
Beneficiary Bank SWIFT Code _____	
Correspondent Bank Name and Branch _____	
Correspondent Bank SWIFT Code _____	
Account Currency #	<input type="checkbox"/> Multi-currency <input type="checkbox"/> AUD <input type="checkbox"/> CNY <input type="checkbox"/> EUR <input type="checkbox"/> GBP <input type="checkbox"/> HKD <input type="checkbox"/> SGD <input type="checkbox"/> USD

^ For joint name account, if there is no indication, the beneficiary will be the first holder, and NO third party payment.

If no currency is indicated, payment will be made in the base currency of the relevant shares.

** Please provide a valid identification (ID) or passport copy to be eligible for cash distribution payments.

3. Tax Status		
Register Holder	1 st holder	2 nd holder
Country of Taxation	(i)	(i)
	(ii)	(ii)
Taxpayer Identification Number (TIN)	(i)	(i)
	(ii)	(ii)

* If you have more than 2 residences, please attach to this form a separate sheet of paper with the related tax identification numbers.

Signature(s) of Registered Holder(s)	Date

For Office Use		
Reference No.	Processed by	Checked by