



- I/We declare that I/we have fully read this Direction and the information I/we have given on this Direction is true and correct.
- I/We declare that my/our current details (including nominated financial institution account registered with Trilogy Funds) are up to date and correct.
- I/We understand that if I/we am/are making an initial contribution into either the Trilogy Monthly Income Trust or the Trilogy Enhanced Income Fund, acceptance of our contribution will be subject to providing a completed Application Form and all required documents that Trilogy Funds may require.

### Section 3: Signatures - all signatories must sign

Signature of Investor 1		Signature of Investor 2 (where applicable)	
Date		Date	
Given name	Surname	Given name	Surname

### How to submit your form

**Please email or post your form and all required documents to:**

Trilogy Funds Management Limited                      investorrelations@trilogyfunds.com.au  
 GPO Box 1648,  
 BRISBANE QLD 4001

**Please contact us if you have any questions about the process.**

Phone Investor Relations on 1800 230 099 (New Zealand callers phone +800 5510 1230) or email investorrelations@trilogyfunds.com.au

Copies of the Product Disclosure Statements and Target Market Determinations for the Trilogy Industrial Property Trust ARSN 623 096 944, Trilogy Monthly Income Trust ARSN 121 846 722 and Trilogy Enhanced Income Fund ARSN 614 682 469 can be found online at [www.trilogyfunds.com.au/forms](http://www.trilogyfunds.com.au/forms)