



FUND MANAGERS LTD

A MEMBER OF THE JMMB GROUP

TYPE OF ACCOUNT		Date: _____ (dd/mm/yyyy)
<input type="checkbox"/> Individual	<input type="checkbox"/> Corporate	
ACCOUNT NUMBER:		

ACCOUNT NAME:

AMOUNT OF PURCHASE

I/We wish to purchase _____ units in the following fund to the value of \$ _____

Optimum Capital
 Income and Growth
 Giltedge
 JMMB Life Goal Fund

Minimum 500units
Minimum 200units
Minimum 500units (JA)
 BF
 RVF
 IDF
 USIDF
 USGF

Minimum 500 units
**Minimum 100 units (US)*

DECLARATION

Redemption Period:

As per the Trust Deed, I am aware that JMMB Fund Managers Limited (JMMBFM) has up to ten (10) business days in which to pay out the proceeds of a redemption, but settlement may be before the expiration of this period.

Offering Circular and Gains from Investments:

a) I am aware that the price of the units and the gains received might go up or down. Therefore the value of my investment is not guaranteed. I also understand that past performance should not be taken as a guide to future performance as gains achieved over a time period may not be repeated.

- Government Securities: Although payment of principal and interest on securities in Government Securities is guaranteed to the Fund, the market value of the securities will fluctuate with rising or declining interest rates.

b) I have received a copy of the Offering Circular on this date or on a previous date and confirm that I am responsible for familiarizing myself with its contents.

Sales Charges:

The Offering Circular that I received discloses any front or back-end sales charges. I am therefore aware of the charges applicable and the associated terms.

Dishonoured Payments

In the event that any cheque or other payment I tender to JMMBFM is dishonoured by my bank or otherwise fails to clear for any reason, I shall immediately replace the same with good and cleared funds, and I shall indemnify the Trustees of the Fund and JMMBFM in full against all costs and losses incurred by them, or any of them, (including, without limitation, overdraft or other finance charges) together with interest thereon at the overdraft rate of JMMBFM's bankers from the date such payment was made or was due until I make full indemnification to JMMBFM. Notwithstanding, the Trustees and/or JMMBFM may at any time without my further authority or consent redeem for the account of the Fund whatsoever units as may be necessary to replace the dishonoured payments and pay the said costs and losses connected therewith.

Client Number	Client Name	Signature

Signing Instructions: Any One to Sign Any Two to Sign Special Instructions:

Account Mailing Address: _____

Telephone Number: _____

Mailing Instructions: Mail Email _____

FOR INTERNAL USE			
/	/	Date:	_____
Authorizing Agent Name	Agent Signature	Branch	(dd/mm/yyyy)
/	/	Date:	_____
Authorizing Agent Name	Agent Signature	Branch	(dd/mm/yyyy)