Morrison Securities Pty Limited

ABN 50 001 430 342 Participant of ASX Group
AFS License: 241737 Participant of SFE

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LEVRAGED EQUITIES ADVISER ACCESS AUTHORITY

Account Manager
Leveraged Equities Pty Limited
Level 1, 175 Pitt Street
SYDNEY NSW 2000

Date: ___/___/___

Dear Sir or Madam:

Re: - Appointment of Broker

We request that you make Morrison Securities Pty Limited as exclusive broker to our account and enable them to receive information electronically and to pay any advisor commission to them.

We also authorise Leveraged Equities to remove other broker, if any from this account and in future so not replace it with other broker, unless advised by client to Morrison Securities in writing.

We also authorise you to pay monthly Internet subscription/ any other charges on request to Morrison Securities Pty Limited and recover the same from our account.

Our account details are

Account Name: _____

Leverage Facility Number: _____

Yours Faithfully

Account Signatories

Name: _____ Name: _____

Signature: _____ Signature: _____

Date: _____ Date: _____