## AIMS AIMS Funds Management

**Change of Address Details Form** 

Please complete this form and send to:

AIMS Fund Management Limited GPO Box 208, Sydney NSW 2001

OF

Fax the completed form to: (02) 9226 0111 Email: middleoffice@aimsfunds.com.au

A Member of AIMS Financial Group

Fund Details - tick which fund is appropriate					
	AIMS Commercial Mortg	jage Fund			
Investor Details PLEASE USE BLOCK LETTER TO G	COMPLETE THIS FORM				
Name					
Investor ID					
"OLD" Contact De	etaus				
Address					
Daytime Phone Number			Mobile Number		
"NEW" Contact De	etails				
Address					
			State		Postcode
Daytime Phone Number			Mobile Number		
Email					
Signatures Investor 1 or					
Company Signatory Name		Signature		Da	nte
Investor 2 or Company Signatory Name		Signature		Da	nte
Power of Attorney and that power.	of attorney, the attorney encloses a declares that he/she has not receive your driver's licence or passport cert tory declarations	ed notice of rev	ocation of		Company Stamp (if req'd)
Adviser Name			Adviser Group		
Signature of Adviser			Date		

of my application fee entitlement to the applicant as additional units.

For further assistance, please contact our Client Services Team on 1300 655 197 or 1300 362 117 Monday to Friday 9.00am to 5.00pm (Eastern Standard Time).

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Please rebate