



Enquiries email: clientservice@pengana.com
Transactions email: transact@pengana.com

Additional investment form

Pengana Diversified Private Credit Fund

Trustee: Pengana Capital Ltd (ABN: 30 103 800 568, AFSL: 226566)

Please use this form if you are an existing investor in our funds and wish to make an additional investment into the same fund or a new investment into a different fund.

Step 1 Read and ensure you understand the Information Memorandumfor the fund you are making an investment into. The IM is available on our website www.pengana.com or from your financial adviser.

Step 2 Complete all sections in block capitals and using a black pen.

Please double check that you have completed the following:

- written your account number and account name as it appears on the latest periodic or transaction statements
- written the amount in Australian dollars
- selected the payment method you would like to use
- signed the form as per the 'Signing instructions' in section 4.

Step 3 Send your documents to us.

You can return your forms by post or email according to the details below:

Send by post:

Pengana Capital Group

GPO Box 804

MELBOURNE VIC 3001

Scan and email to: transact@pengana.com

Step 4 Transfer your application money to us.

Please refer to section 3 'Payment of application amount'.

1. INVESTOR DET	TAILS		
I. INVESTOR BET	ALEO		
Account number			
Account name			
2. OTHER INSTRU	JCTIONS		
	ge your other instructions (such as your reporting pease complete the relevant form, available from www.	oreferences, financial adviser information, bank account details or w.pengana.com.	
Fund names		Additional investment amount AUD\$ Minimum amount: \$50,000	
Pengana Diversifi	ed Private Credit Fund		
3. PAYMENT OF A	APPLICATION AMOUNT		
Select your payme	nt method and complete the relevant section if app	licable. All payments must be made in AUD.	
EFT	Direct debit	BPAY® Cheque	
	Brioditassic	Should Should	
EFT	Electronic Funds Transfer		
Account name:	Pengana Capital Ltd Applications Trust Account		
BSB:	083-001		
Account number:	468 834 086		
Your reference:	please use the full name of the investor for new in	vestment and investor number for existing investment	
Direct debit author	ity - Australian bank accounts only		
You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.			
	al Ltd, as set out in this Request and in your Direct	rms and conditions governing the debit arrangements between you Debit Request Service Agreement, a copy of which is available on	
Financial institution	n name	Branch name (if applicable)	
Account name			
BSB number		Account number	

I/We request and authorise Pengana Capital Ltd ABN 30 103 800 568 a debit to the nominated account as deemed payable by Pengana.	(User ID 502729) to arrange, through its own financial institution,
Signature of primary account holder	
Please print full name	Date (DD/MM/YYYY)
Signature of joint account holder (if applicable)	
Please print full name	Date (DD/MM/YYYY)
BPAY® - Telephone & internet banking	
You can make your payment using telephone or internet banking.	
You will need to quote the biller code and your account number (for ref	erence) when making this payment.
If this is a new investment, we will notify you of your account number o of this notification. $ \\$	nce this is available. Please make your payment within 14 days
Contact your bank or financial institution to make this payment from \boldsymbol{y}	our cheque, savings, debit or transaction account.
More info www.bpay.com.au ®Registered to BPAY Pty Ltd ABN 69 079 1	37 518
Fund name	BPAY® details
Pengana Diversified Private Credit Fund	Biller code 419002 Reference number [Account Number]
Cheque	
Please note we only accept Australian cheques. Please make your che Attach the cheque with your original application forms when posting. F	
Actually the chaque with goal original application for the whori posting.	iodos cross dria witte non negotiable circlic cheque.

4. DECLARATIONS & ACKNOWLEDGMENTS

When you apply to invest, you (the applicant) are telling us:

- you have received, read and understood the current IM
- monies deposited are not associated with crime, money laundering or terrorism financing, nor will monies received from your account have any such association
- you are not bankrupt or a minor
 - you agree to be bound by the constitution of the Fund and the IM as supplemented, replaced or re-issued from time to time.

Who needs to sign this form?

Individual - where the investment is in one name, the account holder must sign.

Joint Holding - where the investment is in more than one name, all of the account holders must sign.

Companies - where the company has a sole director who is also the sole company secretary, this form must be signed by that person.

If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust - the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney – if you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document of the Power of Attorney. I/We attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

5. SIGNATURE(S)		
Signature of investor 1, director or authorised signatory	Signature of investor 2, director/company secretary or authoris	sed
Signature	Signature	
Given name(s)	Given name(s)	
Surname	Surname	
Date (DD/MM/YYYY)	Date (DD/MM/YYYY)	
Company officer (please indicate company capacity)	Company officer (please indicate company capacity)	
Director	Director	
Company Secretary	Company Secretary	
Authorised Representative	Authorised Representative	