

# SMALL ESTATE STATEMENT AND INDEMNITY

This form is used for estates too small to apply for Probate and with a current unitholding not exceeding \$25,000 in market value.

## Details of holding

Investor ID	<input type="text"/>	Title	<input type="text"/>
Given name(s)	<input type="text"/>	Surname	<input type="text"/>
Street	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>
Country	<input type="text"/>		

## Declaration and signature of executor(s) or administrator(s)

I/We do solemnly and sincerely declare I am/we are the legal representative(s) for the above deceased estate. Due to the small value of the estate no Probate/Letters of Administration or reseal of foreign Probate/Letters of Administration has/have been obtained for the estate, nor is it my/our intention to obtain such a grant or reseal. I/We request Trilogy Funds Management Limited permit the transfer of the units detailed above to me/ourselves as legal representative(s) of the estate or to the beneficiaries/transferees without requiring a grant of Probate/Letters of Administration or reseal of foreign Probate/Letters of Administration be obtained in the state of Queensland where the units are registered.

In consideration of Trilogy Funds Management Limited registering the units in my/our name(s) or in the names of the beneficiaries/transferees, I/we hereby covenant to indemnify and forever keep indemnified Trilogy Funds Management Limited, the directors and officers of Trilogy Funds Management Limited, the custodian and the directors and officers of the custodian from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs and expenses whatsoever, which may be made or brought against them by reason of compliance with this request.

The witness(es) certifies that the person(s) who has/have signed this statement is/are known to them and has/have signed in the presence of the witness(es) with their normal signature(s).

### EXECUTOR/ADMINISTRATOR 1 SIGNATURE

Date / /

### EXECUTOR/ADMINISTRATOR 2 SIGNATURE

Date / /

### EXECUTOR/ADMINISTRATOR 3 SIGNATURE

Date / /

### WITNESS 1 SIGNATURE

Date / /

### WITNESS 2 SIGNATURE

Date / /

### WITNESS 3 SIGNATURE

Date / /

## PLEASE POST ALL REQUIRED DOCUMENTS TO:

Trilogy Funds  
GPO Box 1648  
BRISBANE QLD 4001

**For further information or assistance please contact Investor Relations:**

☎ Free call 1800 230 099 (or +61 7 3039 2828 outside Australia)

✉ [investorrelations@trilogyfunds.com.au](mailto:investorrelations@trilogyfunds.com.au)