

# Ruffer Total Return International – Australia Fund



## Initial Application Form

The Trust Company  
(RE Services) Limited

ABN

45 003 278 831

Fund name

Ruffer Total Return  
International –  
Australia Fund

Fund ARSN

643 278 693

This Initial Application Form relates to a Product Disclosure Statement dated 30 September 2022 (PDS) issued by the Trust Company (RE Services) Limited ABN 45 003 278 831, AFSL 643 278 693, for the offer of units in the Ruffer Total Return International – Australia Fund ('Fund'). Terms defined in the PDS have the same meaning in this Initial Application Form. The PDS contains important information about investing in the Fund, and you are advised to read the PDS before completing this Initial Application Form.

If you are an existing Unitholder(s) and this is an additional investment, please use the Additional Investment Form. The Target Market Determination (TMD) is available on request, please email [australiafund@ruffer.co.uk](mailto:australiafund@ruffer.co.uk)

If you are a new investor, or if you are an existing Unitholder(s) and this investment is NOT in the same name(s) and fund as your existing account, please complete the sections of this Initial Application Form and the Identification Forms noted below in Section 1. If you have not been provided with the Identification Form with this application, please contact Ruffer at [australiafund@ruffer.co.uk](mailto:australiafund@ruffer.co.uk)

### 1 Investor type

		Complete sections	Please complete the required Identification Form and provide certified copies of the identification requested
<input type="checkbox"/> Individual and Joint investors	A natural person or persons.	2, 4, 5, 6, 7, 8	Form A – Individuals
<input type="checkbox"/> Sole trader	A natural person operating a business under their own name with a registered business name.	3, 4, 5, 6, 7, 8	Form A – Individuals
<input type="checkbox"/> Companies	A company registered as an Australian public company or an Australian proprietary company, or a foreign company.	3, 4, 5, 6, 7, 8	For a Company complete the relevant form based on company type either Forms B or C. All Beneficial Owners named on Form B or C must complete Form A.
<input type="checkbox"/> Trusts	Types of trusts include self-managed superannuation funds, registered managed investment schemes, unregistered wholesale managed investment schemes, government superannuation funds or other trusts (such as family trusts and charitable trusts).	3, 4, 5, 6, 7, 8	For the Trust complete either Form D or E; and For an Individual Trustee complete Form A; or For a Company Trustee complete Form B or C All Beneficial Owners named on Form D or E must be complete Form A
<input type="checkbox"/> Partnership	A partnership created under a partnership agreement.	3, 4, 5, 6, 7, 8	For the Partnership please complete Form F All Beneficial Owners named on Form F must complete Form A.
<input type="checkbox"/> Associations	Incorporated associations are associations registered under State or Territory based incorporated association statutes. Unincorporated associations are those of persons who are not registered under an incorporated associations statute and thus do not have the legal capacity to enter into agreements.	3, 4, 5, 6, 7, 8	For the Association please complete Form G. All Beneficial Owners named on Form G must complete Form A.
<input type="checkbox"/> Registered co-operative	An autonomous association of persons united voluntarily to meet common economic, social and cultural needs and aspirations through a jointly-owned and democratically-controlled enterprise registered under a registry system maintained by a State or Territory. This investor type can include agricultural businesses such as a dairy co-operative.	3, 4, 5, 6, 7, 8	For the Registered co-operative please complete Form H. All Beneficial Owners named on Form H must complete Form A.
<input type="checkbox"/> Government body	The government of a country, an agency or authority of the government of a country, the government of part of a country or an agency or authority of the government of part of a country.	3, 4, 5, 6, 7, 8	For a Government body please complete Form I. All Beneficial Owners named on Form i must complete Form A.

## 2 Individuals and joint account holders investor details

### Applicant 1

Investor type  Individual

Full name  
Title  Given name   
Surname

Australian Tax File Number  Occupation

Residential address  
Street address 1   
Street address 2

Suburb  State  Postcode

Country

Postal address  
(if different to residential)  
Street address 1   
Street address 2

Suburb  State  Postcode

Country

Telephone Business hours  Non-business hours

Mobile  Email

Preferred contact method  
 I consent to receive all investor correspondence by email to the email address provided.  
 I wish to receive all investor correspondence by post to the postal address provided.  
 I nominate my financial advisor, as noted in section 6, to receive all investor correspondence.

### Applicant 2

(if applicable)

Investor type  Individual

Full name  
Title  Given name   
Surname

Australian Tax File Number  Occupation

Residential address  
Street address 1   
Street address 2

Suburb  State  Postcode

Country

Postal address  
(if different to residential)  
Street address 1   
Street address 2

Suburb  State  Postcode

Country

Telephone Business hours  Non-business hours

Mobile  Email

Preferred contact method  
 I consent to receive all investor correspondence by email to the email address provided.  
 I wish to receive all investor correspondence by post to the postal address provided.  
 I nominate my financial advisor, as noted in section 6, to receive all investor correspondence.

### 3 All other account holders investor details

Investor type/ capacity	<input type="checkbox"/> Company	<input type="checkbox"/> Association
	<input type="checkbox"/> Sole trader	<input type="checkbox"/> Co-operative
	<input type="checkbox"/> Trust	<input type="checkbox"/> Government body
	<input type="checkbox"/> Partnership	<input type="checkbox"/> Other
Full name of company/ business if sole trader/ trust (including trustee details/partnership/ association/co-operative/ government body	<input type="text"/>	
Tax File Number	<input type="text"/>	ABN (if applicable) <input type="text"/>
Principal business activity	<input type="text"/>	
Address Street address 1 Street address 2	<input type="text"/>	
Suburb	<input type="text"/>	State <input type="text"/> Postcode <input type="text"/>
Country	<input type="text"/>	
Telephone Business hours	<input type="text"/>	Mobile <input type="text"/>
Fax	<input type="text"/>	Email <input type="text"/>
Preferred contact method	<input type="checkbox"/> I consent to receive all investor correspondence by email to the email address provided.	
	<input type="checkbox"/> I wish to receive all investor correspondence by post to the postal address provided.	

### 4 Authorised representative details

Complete this section if you wish to appoint a person to act in a legal capacity as your authorised representative and to operate your investment in the Fund on your behalf. In general, an authorised representative can do everything you can do with your investment, except appoint another authorised representative.

We may act on the sole instructions of the authorised representative until you advise us in writing that the appointment of your authorised representative has terminated. We may also terminate or vary an

appointment of an authorised representative by giving you 14 days prior notice.

If an authorised representative is a partnership or a company, any one of the partners or any Director of the company is individually deemed to have the powers of the authorised representative.

Please attach a certified copy of your Power of Attorney.

For information on how to certify your document please refer to the Certification Information Sheet.

Authorised representative	Title <input type="text"/>	Given name <input type="text"/>
	Surname <input type="text"/>	
Signature of authorised representative	<input type="text"/>	Date <input type="text"/>

## 5 Investment details

Share class (if applying into a specific class)	<input type="text"/>	Investment amount (subject to minimums)	<input type="text"/>
Source of funds being invested (choose most relevant)	<input type="checkbox"/> Retirement income <input type="checkbox"/> Employment income <input type="checkbox"/> Business activities <input type="checkbox"/> Sale of assets	<input type="checkbox"/> Inheritance/gifts <input type="checkbox"/> Financial investments <input type="checkbox"/> Other	
Payment method	<input type="checkbox"/> Cheque, payable to Ruffer Total Return International – Australia Fund Application	<input type="checkbox"/> Direct credit/Electronic Funds Transfer Bank National Australia Bank Acct name Apex Fund Services Pty Ltd as custodian for Ruffer Total Return International – Australia Fund Application Account BSB 082-401 Acct number 228302750 SWIFT NATAAU3303M	
Distribution payment instructions (choose one)	<input type="checkbox"/> Reinvest my distributions in the relevant Fund <input type="checkbox"/> Pay my distributions directly to my nominated bank account		
Your distribution bank account details	Bank <input type="text"/>	Account name <input type="text"/>	
	BSB <input type="text"/>	Account number <input type="text"/>	
Redemption account If you require a separate account for redemption payments, please provide details	Bank <input type="text"/>	Account name <input type="text"/>	
	BSB <input type="text"/>	Account number <input type="text"/>	
Savings plan (if applicable)	<input type="text"/>		

## 6 Financial advisor details

By filling out this section you nominate and consent the named financial advisor access to your information.

Advisor name (full name)	<input type="text"/>	Name of advisory firm	<input type="text"/>
Name of dealer group	<input type="text"/>	AFSL or AFSL representative number	<input type="text"/>
Address Street address 1 Street address 2	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>
Country	<input type="text"/>		
Telephone Business hours	<input type="text"/>	Mobile	<input type="text"/>
Fax	<input type="text"/>	Email	<input type="text"/>

If you have elected your financial advisor to receive all investor correspondence, please confirm the advisor's preferred contact method

- I consent to receive all investor correspondence by email to the email address provided above.  
 I wish to receive all investor correspondence by post to the address provided above.

By completing this section you are providing consent for us to redeem a sufficient number of units from your investment at the end of each month to pay the financial advisor the following fees –

Flat % of remuneration	<input type="text"/> %	Dollar remuneration per month (inc GST)	<input type="text"/> \$
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## 7 Declaration

I/we declare and agree each of the following –

- I/we have read the current PDS to which this application applies and have received and accepted the offer in it.
- My/our application is true and correct.
- I am/we are bound by any terms and conditions contained in the current PDS and the provisions of the constitution of the Fund as amended from time to time.
- I/we have legal power to invest.
- If this is a joint application, each of us agrees that our investment is as joint tenants. Each of us is able to operate the account and bind the other to any transaction including investments or withdrawals by any available method.
- If investing as trustee on behalf of a super fund or trust, I/we confirm that I am/we are acting in accordance with my/our designated powers and authority under the relevant trust deed. In the case of a super fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993.
- I/we acknowledge that none of the Trust Company (RE Services) Limited ABN 45 003 278 831 or any of their related entities, officers or employees or any related company or any of the appointed service providers including the investment manager and custodian guarantee the repayment of capital or the performance of the Fund or of any particular rate of return by the Fund.
- I/we agree to the anti-money laundering and counter-terrorism financing statements contained in the PDS. I/we agree to provide further information or personal details to the Trust Company (RE Services) Limited and the custodian if required to meet their obligations under any anti-money laundering and counter-terrorism law and regulations, and acknowledge that processing of my/our application may be delayed and will be processed at the unit price applicable for the business day on which all required information has been received and verified.

- I/we have read and understood the privacy disclosure as detailed in the PDS. I/we consent to my/our personal information being collected, held, used and disclosed in accordance with the privacy disclosure. I/we consent to the Trust Company (RE Services) Limited disclosing this information to my/our financial adviser (named in this form) for units in the Fund. Where the financial adviser no longer acts on my/our behalf, I/we will notify the Trust Company (RE Services) Limited of the change.
- If I/we have appointed an authorised representative, I/we release, discharge and indemnify the Trust Company (RE Services) Limited from any loss, expense, action or other liability which may be suffered by, brought against me/us or the Trust Company (RE Services) Limited for any action or omissions by the authorised representative whether authorised by me/us or not.
- If I/we have appointed a financial adviser, payment to the financial adviser of the amount stated in section 6, which includes any amounts invested under the Savings Plan.
- I/we certify that the information provided in the separate ID forms, including information relating to tax-related requirements, is reasonable based on verifiable documentation.

I/we acknowledge and agree that

- The Trust Company (RE Services) Limited may be required to pass on my/our personal information or information about my/our investment to the relevant regulatory authorities, including for compliance with anti-money laundering and counter-terrorism law and regulations as well as any tax-related requirements for tax residents of other countries.

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## 8 Signatures

Joint applicants must both sign, For Individual Trustee Trust/Superannuation Funds each individual Trustee must sign. For Corporate Trustee Trust/Superannuation Funds, two Directors, a Director and Secretary or Sole Director must sign

### Applicant 1

Signature

Full name

Date

Capacity

(mandatory for companies)

Sole Director and Company Secretary

Director

Secretary

Non-corporate trustee

Partner

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### Applicant 2

Signature

Full name

Date

Capacity

(mandatory for companies)

Director

Secretary

Non-corporate trustee

Partner

Please post your original signed Initial Application Form, Identification Forms and certified copies of your identification required to –

Unit Registry

Apex Fund Services Pty Ltd

GPO BOX 4968

Sydney NSW 2001

Completed applications may also be emailed to –

[registry@apexgroup.com](mailto:registry@apexgroup.com)

Please ensure you have transferred your application monies or enclose a cheque for payment.