

APPLICATION FORM

Issued by Guardian Securities Limited ACN 106 187 731 AFSL No 240506.

FOR INTERESTS IN MASTER MORTGAGE FUND NO 6 ARSN 114 364 886 SCHEME

PRODUCT DISCLOSURE STATEMENT

DATED 15 November 2013

Application Form for Master Mortgage Fund No 6 Scheme

I / we wish to apply for interests in the Master Mortgage Fund No 6 Scheme ARSN 114 364 886 and hereby agree to be bound by its Constitution.

1. Type of Investor

Are you applying as:			
<input type="checkbox"/>	Individual Investor (go to Section 2)	<input type="checkbox"/>	A Trust (go to Section 3)
<input type="checkbox"/>	Joint Investors (go to Section 2)	<input type="checkbox"/>	A Company (go to Section 3)
<input type="checkbox"/>	Partnership (go to Section 2)	<input checked="" type="checkbox"/>	Self-Managed Superannuation Fund (SMSF) as (see below)
	<input type="checkbox"/> Individual Trustee go to Section 2	<input checked="" type="checkbox"/>	<input type="checkbox"/> Corporate Trustee go to Section 3

2. Individual or Individual Trustee of a Trust or Superannuation Fund

Applicant 1	Individual <input type="checkbox"/>	Joint-2 <input type="checkbox"/>	Partnership <input type="checkbox"/>	Trustee <input type="checkbox"/>
Surname (Mr, Mrs, Ms)				
First Names				
Date of Birth		Tax File Number		
Contact Details (Street Address and a phone number must be supplied as a minimum)				
Street Address				
State		Post Code		
Country				
Phone Number		Mobile Number		
Email Address				
Postal Address				
Notices and correspondence will be sent to the postal address if provided or the street address if a postal address is not provided.				

Application Form (continued)	
Applicant 2 Individual <input type="checkbox"/> Joint-2 <input type="checkbox"/> Partnership <input type="checkbox"/> Trustee <input type="checkbox"/>	
Surname (Mr, Mrs, Ms)	
First Names	
Date of Birth	Tax File Number
Contact Details (Street Address and a phone number must be supplied as a minimum)	
Street Address	
State	Post Code
Country	
Phone Number	Mobile Number
Email Address	
Postal Address	
If there are additional account holders please attach details in writing to this Application Form.	

3. Name of Company, Corporate Trustee of a Trust or Superannuation Fund

Name of Company or Corporate Trustee MANTILLA SUPERANNUATION PTY LTD	
Account designation i.e. name of trustee / superannuation fund MANTILLA SUPERANNUATION PTY LTD AS TRUSTEE FOR J & C MANTILLA SUPERANNUATION FUND	
Registered Office 17 VALLEY VIEW CRES, GLENDALE, NSW 2285	ABN/ACN and / or Tax File Number ACN: 164 076 500 / TFN: 948 351 142
Contact Details (Street Address and a phone number must be supplied as a minimum)	
Street Address	17 VALLEY VIEW CRES
	GLENDALE
State NSW	Post Code 2285
Country	
Contact Name ANECITO MANTILLA	Title DOCTOR
Phone Number 0439 383 622	Mobile Number
Email Address INFO@ABHUB.COM.AU	
Postal Address	17 VELLEY VIEW CRES, GLENDALE, NSW 2285

4. How would you like to receive your payments?

Interest payments or distributions will be made by credit transfer to your nominated bank account. Please provide details of your bank account below.

Distributions or Interest payments will be made by electronic transfer to the nominated account below:	
Account Name (for interest or distributions - account must bear the name of the Applicant and match the supporting AML-CTF identification documentation supplied) MANTILLA SUPERANNUATION PTY LTD AS TRUSTEE FOR J & C MANTILLA SUPERANNUATION FUND	
Name of Bank or Financial Institution CBA	Address
B/S/B 062-806	Account Number 1039 6582

Financial Adviser, Agent or Broker (If applicable)		
Person	Company	
Phone Number		Mobile Number
Email Address		
Postal Address		
Stamp	Name	Signature

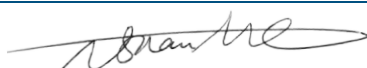
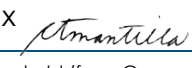
APPLICATION FORM COMPLETED WITH CORRECT DETAILS

- If investing through a Superannuation fund or Trust, has the correct trustee been used?
- A cheque for \$75,000 being the Minimum Subscription made out to: "Guardian Securities Limited – MMF 6 Application Account" is attached.
- I have included the correct Anti-money Laundering documentation
- Investing as an individual – Individual ID forms
 - Investing as a company – Company ID form
 - Super Fund or Trustee – depending on the Trustee
- If individual trustees, Anti-money laundering documentation for each Trustee has been included.
- If Corporate Trustee – company Anti-money laundering documentation certified copy of the relevant ID for each Investor or Trustee.

Important Notice – This Application Form must be accompanied by the Product Disclosure Statement.

- The offer under this PDS is available to people receiving the PDS within Australia.
- The PDS is dated 15 November 2013 which is the date it was issued.
- It is advisable to read the PDS & any SPDS before applying to invest because the PDS & any SPDS may contain important information about Guardian Securities Limited and an Investment in the Scheme.
- I/We have read and understood the attached Product Disclosure Statement for Master Mortgage Fund No 6 and agree to be bound by the provisions of the Scheme's Constitution and any other additional obligations or restrictions contained in the PDS and any SPDS.
- I/We acknowledge the Responsible Entity's privacy policy and acknowledge that it will hold personal information about me/us and will disclose this information to my/our authorised representative in relation to the Investment described in this Application Form.
- I/We acknowledge that Guardian Securities Limited will cease to disclose this personal information if I/we notify Guardian Securities Limited that the authorised representative mentioned above no longer acts on my/our behalf.
- I/We acknowledge that Guardian Securities Limited is not bound to accept my/our application, but may accept it in part or in whole.
- I/We have made an offer to become an Investor in the Scheme which cannot be revoked.
- I/We confirm that I/we have had opportunity to seek professional advice regarding all aspects of this Investment and have not relied on any statements or representations made by any party (including Guardian Securities Limited and its officers, employees and agents) prior to applying, other than those written representations made in the PDS.
- I/We acknowledge that no company in the Guardian Securities group or its associated entities, its shareholders or directors guarantees the performance of the Scheme, the return of my/our capital or any specific rate of return.

SIGNING THE APPLICATION FORM

Identification (AML/CTF Act legislation requirement, see section "Guide to completing the Application Form")	
Has the required supporting documentation been included with this application?	Yes <input checked="" type="checkbox"/>
Contact Method Authority (ID questions will be asked for phone instructions and a call back for email and facsimile instructions)	
Instructions from the Applicant can be accepted by phone, email or facsimile	Yes <input checked="" type="checkbox"/>
I/we acknowledge and declare that by signing this Application Form I/we have read and understood the attached PDS & any SPDS and where applicable give the declarations, acknowledgements and consents set out in the section "Guide to Completing the Application Form".	
Applicant(s) Signature (Individual, Joint Applicants)	
Print Name ANECITO MANTILLA	Sign X 
Date 19/02/2014	Position held (for a Company, Trust or Self-Managed Super Fund) Director of MANTILL SUPERANNUATION PTY LTD AS TRUSTEE FOR J & C MANTILLA SUPERANNUATION FUND
Print Name CHARINA MANTILLA	Sign X 
Date 19/02/2014	Position held (for a Company, Trust or Self-Managed Super Fund) Director of MANTILLA SUPERANNUATION FUND AS TRUSTEE FOR J & C MANTILLA SUPERANNUATION FUND
Completed Applications - signed original Application Forms and application monies along with certified copies of supporting identification documentation should be sent to the Responsible Entity whose address is shown in the Corporate Directory at:	
Guardian Securities Limited Suite 7 211 Ron Penhaligon Way Robina Qld 4226	

