

SECURITY TRANSFER FORM

Full Name Of Company	Mundaring Community Financial Services Ltd	State of Incorporation Western Australia
Full Description of Securities	Class ORDINARY FULLY PAID	If not fully paid, paid to Register
Quantity	WORDS	FIGURES
Full Name(s) of SELLER(S) [Transferor(s)]	Surname(s) (Please use Block Letters) Mr/Mrs/Miss/Ms	
	Given Name(s)	
	Shareholder Reference Number (SRN) 	
Consideration	Date of Purchase / / 20	
Full Name(s) of BUYER(S) [Transferee(s)]	Surname(s) (Please use Block Letters) Mr/Mrs/Miss/Ms	
	Given Name(s)	
	Shareholder Reference Number (SRN) 	
Full Postal Address of BUYER(S)		
	STATE	POSTCODE
Removal Request		

I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above name(s) hereinafter called the Buyer(s) the securities as specified above standing in my/our name(s) in the books of the above-named Company, subject to the several conditions on which I/We held the same at the time of signing hereof and I/We the Buyer(s) do hereby agree to accept the said securities subject to the same conditions.
I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed

SELLER(S)		
SIGN		
HERE		
Date Signed	/ / 20	
BUYER(S)		
SIGN		
HERE		
Date Signed	/ / 20	