1. CLIENT DETAILS

Client Account Number

Client/Director/Trustee 1

Title
- Mr
- Mrs
- Ms
- Miss
- Dr
- Other

First Name
Surname
Company/Trust Name
SRN

Client/Director/Trustee 2

Title
- Mr
- Mrs
- Ms
- Miss
- Dr
- Other

First Name
Surname
ACN/ABN Number (if applicable)

2. EXERCISE DETAILS

Please arrange payment to the relevant share registry to facilitate the exercise of the Company Options detailed below.

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<th>Number of Options</th>
<th>Exercise Price</th>
<th>Amount Payable</th>
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Total amount payable $  

The following documents must be attached in order to process this request.
- Copy of Employee Option Plan Holding Statement
- Completed original Notice of Exercise of Options
- Completed original ANZ Investment Lending Application Form (New clients only)
3. CLIENT AUTHORISATION (ALL SIGNATORIES MUST SIGN)

I/We (or acting in capacity as Company Director/s) authorise and direct:

- ANZ Investment Lending to pay the amount detailed above (being the total amount payable) to enable the exercise of my options.
- ANZ Investment Lending to hold the Fully Paid Ordinary Shares as security against my ANZ Share Investment Loan.
- The Share Registry responsible for the exercise of these options to deliver the Fully Paid Ordinary Shares to my SRN as instructed by ANZ Investment Lending.
- The Share Registry to accept any instruction to amend my registration details upon advice from ANZ Investment Lending.

I/we understand that should a margin call occur during the black out period (if applicable), I/we are responsible for ensuring that ANZ Investment Lending are not required to sell the fully paid ordinary shares resulting in this option exercise.

I/we understand that should a margin call occur, sufficient security and/or funds (or sale proceeds of stock other than that detailed in this exercise request) must be provided to meet the margin call in full.

Client/Director/Trustee 1 Name

Client/Director/Trustee 1 Signature

Client/Director/Trustee 2 Name

Client/Director/Trustee 2 Signature

Date

Date