

Investor Details Notification / Changes Instruction

Full name of registered holding account:

Investor ID:

A. Change of Address / Contact Details Notification

Address:

Suburb/City:

State:

Postcode:

Email Address:

Daytime Phone Number:

Mobile:

B. Request for Direct Crediting of Payments

It is essential these details are correct for deposits to your nominated account. If in doubt, check with your Financial Institution.

BSB Number: _____

Account Number: _____

Name of Account:

Bank:

Branch:

C. Tax File Numbers (TFN), Australian Business Numbers (ABN) OR Exemptions

Use this form to provide your TFN and/or to claim the appropriate exemption by quoting the Exemption Code. A Company, Partnership, Trust, Super Fund or an Individual can provide either their TFN, or, where the securities are held for a business purpose, their ABN.

Individuals / Joint Holders

Name of Individual (Investor 1)

Mark this box with an "X" if Exemption Applies

TFN of Individual (Investor 1)

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Type of Exemption

Name of Joint Holder (Investor 2)

or ABN Number

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TFN of Joint Holder (Investor 2)

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D. Sign Here

This section must be signed for your instructions to be executed.

I/We the registered holder(s) acknowledge that I/We have read and agree to be bound by the terms and conditions of the Distribution Reinvestment Plan for the MPG Regional Cities Property Trust as amended from time to time.

Note: this notice must be signed by the Unitholder(s), and if a corporation, under its common seal, or by attorney. If signed by an attorney, please forward the power of attorney to MPG Funds Management for noting, unless already noted. Please note that Notices which are incomplete or incorrectly signed will be invalid and ineffective and will be returned.

(signing page overleaf)

Signature of Investor 1/Trustee/Company Officer:	Signature of Investor 1/Trustee/Company Officer:
Name of Investor 1/Trustee/Company Officer:	Name of Investor 1/Trustee/Company Officer:
Date:	Date:
<input type="checkbox"/> Director <input type="checkbox"/> Sole Director and Company Secretary <input type="checkbox"/> Trustee <input type="checkbox"/> Other (please specify)	<input type="checkbox"/> Director <input type="checkbox"/> Company Secretary <input type="checkbox"/> Trustee <input type="checkbox"/> Other (please specify)

How to complete this form

A. Change of Address / Contact Details Notification

This Section must be completed in full. Enter your current registered (old) address as it appears on the payment advice received by you. Enter your new address details that you wish to have recorded. Please note that only one address can be recorded. This should be the address for delivery of all future correspondence.

B. Request for direct crediting of payments

Complete this section if you want to change the banking details you have previously provided to us. Your payments can be paid directly into any Australian bank, credit union or building society account, nominated by you. Until you advise otherwise, all future cash payments will be paid into the nominated account.

Neither the Company nor the Registry will be responsible for any delays in crediting dividends to your nominated account as a result of transaction procedures or errors by any financial institutions. This instruction only applies to the specific holding identified by the Unitholder number and the name appearing on this form. **IMPORTANT: SEE BELOW FOR EXEMPTION CATEGORIES**

C. Tax File Numbers (TFN), Australian Business Numbers (ABN) or Exemptions

Please record your TFN, ABN or the appropriate exemption information. If you are exempt, but have a TFN, it is safer to provide your TFN in case your circumstances change.

For investments held jointly, details of only two investors are required. If possible, you should give details of those securities with a TFN rather than those who are exempt.

For investments held on behalf of another person, such as a child or an aged or invalid person, enter the Trust TFN. If there is no Trust TFN, enter the Trustee's TFN or exemption. Where the investment is held by an adult for a child, the adult is the Trustee.

IMPORTANT: SEE BELOW FOR EXEMPTION CATEGORIES

Exemption Categories

For details about who is exempt, please contact the Australian Taxation Office. To claim your exemption, please enter the number of the pension or benefit you receive from the following list:

Description	Exemption Code	Description	Exemption Code
Aged Pension	444444441	Carer's Pension	444444442
Invalid Pension	444444441	Non Profit Organisation	555555555
Rehabilitation Allowance	444444442	Service/Veteran's Pension	444444441
Sole Parent's Pension	444444442	Special Benefit	444444442
Widow's Pension	444444442	Wife's Pension	444444442

It is not an offence to withhold your TFN or, where the securities are held for a business purpose, your ABN. However, if you do not provide your TFN or ABN, tax may be deducted from payments of interest and distributions at the highest marginal rate.

This instruction only applies to the specific holding identified by the Unitholder number and the name appearing on the front of this form.

For more information about Tax File Numbers, Australian Business Numbers and Exemptions please contact the Australian Taxation Office on 1300 781 081.

Where to send this form

1. Mail to Investor Relations, MPG Funds Management, PO Box 1307 Camberwell Vic 3124
2. Or scan and email to invest@mpgfm.com.au

**Any questions?
Please call us on 1300 668 247**