ASX Limited ABN 98 008 624 691	All Registry communications to MUFG Corporate Markets (AU) Limited	
Full Name(a) of Begintered Holding	A division of MUFG Pension & Market Services Locked Bag A14	
Full Name(s) of Registered Holding	Sydney South NSW 1235 Australia	
	Telephone: +61 1300 724 91	
	(02) 8280 7470 Facsimile: (02) 9287 0303	
	ASX Code: ASX	
Account Designation	Email: asx@cm.mpms.mufg.con	
	Website: au.investorcentre.mpms.mufg.con	
Registered Address		
	Securityholder Reference Number (SRN) Or Holder Identification Number (HIN)	
Postcode		
A DIVIDEND REINVESTMENT PLAN IN	ISTRUCTION FORM	
Please use a BLACK pen. Print CAPITAL letters inside the shaded areas. ABC 1 2 3	Where a choice is required, mark the box with an 'X'	
This form is to be completed where the shareholder wishes to commence, vary or cancel their parents (the 'DRP').	articipation in the ASX Limited ('ASX') Dividend Reinvestmen	
The DRP enables eligible ASX shareholders to re-invest dividends to which the DRP applies in a the DRP applies to each dividend at the time it determines that dividend. ASX will announce whether		

I/We being the above named holder of registered shares wish to participate (or cease participating) in the DRP as indicated below.

I/We authorise the application of my/our dividend payment with respect to the number of shares participating in the DRP to the allocation of additional shares at the price provided in, and subject to the rules of, the DRP.

I/We hereby agree to be bound by the rules of the DRP.

I/We acknowledge that I/we may vary or cancel my/our participation in the DRP, in accordance with the rules of the DRP and that my/our instructions below will cancel any earlier DRP instructions and take priority over any direct credit instructions.

Degree of Participation (cross appropriate box):

Sole Director and Sole Company Secretary

Director/Company Secretary (delete as appropriate)

	FULL PARTICIPATION	 Including any further acquisitions. 		
	or	Please specify the number of shares to participate in the DRP.		
	PARTIAL PARTICIPATION	• •		
	or			
	CANCEL PARTICIPATION	If you wish to cancel your DRP participation.		
B SIGNATURE(S) OF SECURITYHOLDER(S) – THIS MUST BE COMPLETED				
Securityho	older 1 (Individual)	Joint Securityholder 2 (Individual) J	oint Securityholder 3 (Individual)	

Signing Instructions: This form should be signed by the Securityholder. If a joint holding, all Securityholders should sign. If signed by the Securityholder's attorney, the power of attorney must have been previously noted by the registry or a certified copy attached to this form. If executed by a company, the form must be executed in accordance with the company's constitution and the Corporations Act 2001 (Cth) (or for New Zealand companies, the Companies Act 1993).

Director/Company Secretary (delete one)

Personal Information Collection Notification Statement: MUFG Pension & Market Services ("MPMS") advises that your personal information is collected by MPMS organisations for the administration of your investment as required or permitted by the Corporations Act 2001 (Cth) and other legislation. Some or all of your personal information may be disclosed to contracted third parties, or related MPMS companies in Australia and overseas. Your information may also be disclosed to Australian government agencies, law enforcement agencies and regulators, or as required under other Australian law, contract, and court or tribunal order. For further details about our personal information handling practices, including how you may access and correct your personal information and raise privacy concerns, visit our website at www.mpms.mufg.com for a copy of the MPMS privacy policy, or contact us by phone on +61 1300 554 474 to request a copy.



Secretary/Director (delete one)

Date