

Company or Trust in which Securityholding is held

HEALTHSCOPE LIMITED

Registered  
Name(s)

MR JOHN ARMSTRONG EGAN &  
MRS BERNADETTE EILEEN EGAN  
<B B & S C SUPER FUND A/C>

Registered  
Address

29 KAIJA STREET  
MOUNT GRAVATT EAST

QLD

4122

**Computershare**

All correspondence to:

Computershare Investor Services Pty Limited  
GPO Box 2975 Melbourne  
Victoria 3001 Australia  
Enquiries (within Australia) 1300 850 505  
(outside Australia) 61 3 9415 4000  
Facsimile 61 3 9473 2500  
web.queries@computershare.com.au  
www.computershare.com

Holder Reference Number (HIN)  
or Securityholder Reference Number (SRN)

X00018613069

Use a black pen.  
Print in CAPITAL letters.

A B C

1 2 3

## Direct Credit

**A**

### Request for Direct Crediting of Payments



This Direct Credit Form will not override any Reinvestment Plan instructions.

**Note:** To withdraw from the Reinvestment Plan please contact Computershare Investor Services Pty Limited.

BSB number (eg. 063000)

014272

Account number

354909991



**DO NOT USE YOUR CREDIT CARD NUMBER**

If you are unsure of your BSB number or account number, please check with your bank, building society or credit union.

Name in which account is held (eg. JOHN SMITH)

THE BIRDSVILLE BULLWHIP AND SADDLE COMPANY SUPER FUND

Name of Australian bank or financial institution

AUSTRALIA AND NEW ZEALAND BANKING GROUP LTD

Name of branch or suburb or town

TOOWONG

Type of account (eg. cheque, savings, etc.)

Contact Name

Telephone Number - Business Hours / After Hours

**B**

### Sign Here - This section must be signed for your instructions to be executed.

I/We authorise you to act in accordance with my/our instructions set out above. I/We acknowledge that these instructions supersede and have priority over all previous instructions relating to payments to which I/we am/are entitled to be paid in cash.

Individual or Securityholder 1

Director

Securityholder 2

Director/Company Secretary

Securityholder 3

Sole Director and Sole Company Secretary

*Note: When signed under Power of Attorney, the attorney states that they have not received a notice of revocation. Computershare Investor Services Pty Limited needs to sight a certified copy of the Power of Attorney.*

Day Month Year

/ /

# How to complete this form

## A Request for Direct Crediting of Payments

Complete this section if you want your cash payments paid directly into your nominated Australian bank, credit union or building society account. Until you advise otherwise, all future cash payments will be paid into the nominated account.

IMPORTANT: DO NOT USE THE NUMBER QUOTED ON YOUR CREDIT CARD

NOTE: The use of correction fluid is not acceptable.

If you do not complete this section or this form is incomplete, unsigned or invalid in any other way, you will continue to receive your payments by cheque.

Neither the company nor the registry will be responsible for any delays in crediting payments to your nominated account as a result of transaction procedures or errors by any financial institution.

This instruction only applies to the specific holding identified by the SRN/HIN and the name appearing on the front of this form.

## B Signature(s)

If you have chosen to have your cash payments paid directly into your nominated Australian bank, credit union or building society account and you have completed Section A, you must sign this form as follows in the spaces provided:

- Joint Holding:

where the holding is in more than one name, all of the securityholders must sign.
- Power of Attorney:

to sign under Power of Attorney, you must have already lodged this document with the registry. If you have not previously lodged this document for notation, please attach a certified photocopy of the Power of Attorney to this form when you return it.
- Companies:

this form must be signed by a Director, a Company Secretary or Sole Director and Company Secretary. Please indicate the office held by signing in the appropriate space or affix the Company Seal.