



Agreement Number: 000000313
Agreement Date: 4/10/2022

Licence Agreement between the Licensee and the Company

Section 1: Licensee

PRIMARY CONTACT PERSON / COMPANY

Account name: **HITS FUTURES PTY LTD ATF HITS FUTURE FUND** Company ABN: **44229774062**

Name: **Simon David Kirkness**

Home / Business address: **98 Donald Drive** City: State: **Western Australia** Postcode: **6169** Country: **Australia**

Postal address: City: State: Postcode: Country:

Home phone: Mobile: **61481121463** Work phone: Email: **simonkirkness@hotmail.com**

*** Please advise us immediately if your address or contact numbers (or those of your specified person) change ***

Section 2: Licensor (The Company) Company name: **Custodian Vaults Pty Ltd** Company ABN: **54159994108**

Business address: **50 St Georges Terrace** City: **PERTH** State: **WA** Postcode: **6000** Country: **AU**

Business phone: **08 6186 2199** Email: **perth@custodianvaults.com.au**

Fee: **\$721.00** Box/s Rented: **440**

Commencement Date: **4/10/2022** Refundable Key Deposit: **\$250**

Section 3: Specified Persons

Name: **Tarryn Lee Meason**

Home address: **98 Donald Drive** City: State: **Western Australia** Postcode: **6169** Country: **Australia**

Home phone: Mobile: **0423611610** Email:

Executed as an agreement I hereby understand and agree to be bound by the Custodian Vaults **Terms of Business** dated 2017 provided to me at the time of signing this Agreement. I agree to Custodian Vaults' **late payment policy** and acknowledge that I will be liable to pay a late payment fee of 12% per annum on all overdue amounts (on a monthly basis) until the day of actual payment, as well as a \$100.00 per month administration fee, and all other applicable fees.

Name of Licensee

X Tarryn Meason

Signature of Licensee

X

Name of Licensee

X Simon Kirkness

Signature of Licensee

X

Name of Licensee

Signature of Licensee

Name of Licensee

Signature of Licensee

Name of Witness

Megan Whelan

Signature of Witness