

Notification of Change of Authorised Signatories

Responsible Entity (Trustee) MLC Investments Limited ABN 30 002 641 661 AFSL 230705	CNA-Capital International Global Equity Trust ARSN 087 778 694 CNA-Capital International Global Equity Trust with Currency Management ARSN 087 779 066	CNA-Capital International Global Equity Trust with Currency Hedged ARSN 094 966 631 CNA-Capital International Emerging Markets Equity Trust ARSN 087 779 833	CNA-Capital International Global Small Capitalisation Equity Trust ARSN 114 539 525 CNA-Capital International Global Agregate Bond Trust ARSN 114 539 043	CNA-Capital International Global High Yield Bond Trust ARSN 114 536 471
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Please complete this form and forward to the address shown below:

Institutional Operations Team

Level 12, MLC Building
105-153 Miller Street
North Sydney NSW 2060

GPO Box 4295
Sydney NSW 2001

Tel (02) 9936 4577
Fax (02) 9936 4500

1 Account Details

Account Number

Account Name

2 Contact Details

Name

Company Name

Address

Postcode

Telephone

 ()

Facsimile

 ()

3 Signing Authority

What are the signing requirements for your investment in the Capital National Alliance Trusts?

Please tick the appropriate box

Any authorised signatory may sign solely

Any two authorised signatories may sign

All documentation must be signed under seal

Other. Please specify

4 Delegated Authority to the Trustee

The following persons whose names and signatures are set out below are hereby authorised to act on our behalf in dealing with the Trustee and its agents in connection with the administration of our investment in the Capital National Alliance Trusts.

The Trustee may therefore, until receipt of further written notice, accept and act upon notices, instructions, requests, data, information and evidence given, made or furnished by the persons specified below or which the Trustee believes to have been given, made or furnished by such persons. Such persons are not authorised to appoint other authorised signatories. We indemnify the Trustee in respect of any claim or liability incurred by them arising directly or indirectly from action taken or omissions made in reliance on or pursuant to such notices, instructions, requests, data, information or evidence.

This notification supercedes all previous notifications given, made or furnished to the Trustee in relation to this matter.

Full Name of Delegate (Block Letters)

Specimen Signature

Specified Matters*

Full Name of Delegate (Block Letters)

Specimen Signature

Specified Matters*

Full Name of Delegate (Block Letters)

Specimen Signature

Specified Matters*

Full Name of Delegate (Block Letters)

Specimen Signature

Specified Matters*

* If the delegated authority is restricted to specific matters (eg, changing contact details), please provide details in this column. Please attach a schedule if more space is required.

5 Authorisation

Changes to authorised signatories must be made by two Directors or one Director and one Secretary of the account holder (or otherwise in accordance with the account holder's constituent documents).

Signature
<input type="text"/>
Print Name
<input type="text"/>
Position
<input type="text"/>
Date
<input type="text" value="/ /"/>

Signature
<input type="text"/>
Print Name
<input type="text"/>
Position
<input type="text"/>
Date
<input type="text" value="/ /"/>

