

# EASTPACK NOTES



### WHOLESALE APPLICATION FORM - SECONDARY MARKET OFFER

Please ensure you complete all THREE (3) parts as detailed below: PART ONE • Complete all details and have <u>all</u> persons associated with the investment entity <u>sign</u> the bottom of page 4. PART TWO 1. Please select what type of entity is making this application to invest and ONLY complete the relevant section for your investment entity (TYPE A, B, C, D or E): Type A: Individual Type B: Joint Individual Type E: Partnership Type C: Trust

#### PART THREE

1. Select which Investor Certificate to complete for your application to invest.

- 2. If you are investing MORE than \$750,000, upon acceptance of your application, you do <u>not</u> need an Investor Certificate for this investment.
- 3. If you are investing LESS than \$750,000, you need to complete:
  - Certificate A <u>or</u>
  - Certificate B <u>and</u> Certificate C (confirming the contents of Certificate B)

#### Anti-Money Laundering and Countering Financing of Terrorism Act 2009 (AML Act)

To help the New Zealand government fight the funding of terrorism and money laundering activities, the law requires all financial institutions to obtain, verify and record information that identifies each person who completes an application to Invest. MyFarm is required to comply with these regulations.

What does this mean for you? We may ask for a range of identity or address verification documents as well as written evidence of the individuals who have effective control or who benefit from the investment entity, including in some cases, evidence of the initial and subsequent funding of the entity. We may ask to see the originals of some documentation or require you to obtain copies "certified" by a professional we trust. Please email: investments@myfarm.co.nz or freephone 0800 693 276 to discuss any of these requirements.

#### **Bio-Verification of Identity Information**

Syndex Biometric Verification is MyFarm's primary tool to verify your identity. This verification process is only available to NZ Passport or NZ Driver's Licence holders who reside in New Zealand. The Bio-verification process is done through an online link and is immediate, removing the need for certified documents. Please ensure you include your mobile phone number and email address so we can forward the Syndex link to initiate the process. Once you complete and return the application form, you will receive a link from Syndex (via text or email) to complete this process. This verification process must be completed by <u>all applicants or investing parties</u> named in the application. **If you do not complete this process, copies of the following required documents must be provided.** 

#### Provide a copy of one of the below:

#### OPTION TWO - Provide a copy of one of the following:

- Current New Zealand Passport
- □ Current international passport
- □ New Zealand firearms license

#### OPTION THREE - Provide a copy of one of the following:

- New Zealand driver license
- □ International driver license

#### Plus, a copy of one of the following:

- □ New Zealand birth certificate
- Overseas birth certificate
- □ New Zealand certificate of citizenship
- Citizenship certificate issued by a foreign government
- □ Current credit, debit or Eftpos card signed by you and issued by a registered New Zealand bank, and a bank statement issued by a registered New Zealand bank dated within the previous 12 months

# <u>Address verification – Copy of one of the</u> following:

- □ Rates notice
- Utility bill (e.g. electricity or phone account)
- Bank Statement dated within last 3 months

#### AND

# Bank documents – Copy of one of the following:

- Bank Statement dated within last 3 months
- Deposit Slip

<u>Note:</u> The statement/deposit slip must match the account details you provide in part one of the Application Form.





## **PART ONE - APPLICATION FORM**

This form is only to be completed by persons investing no less than 20,000 and who fall within Schedule 1, clause (3)(2)(a) - (c) or (3)(3)(a) - (b)(ii) (inclusive) of the Financial Markets Conduct Act 2013.

To: AGInvest Trading Limited (trading as MyFarm Investments) ("MyFarm"), PO Box 91, Feilding

#### **Re: EASTPACK NOTE – SECONDARY MARKET OFFER**

This is a Secondary Market Offer to wholesale investors of EastPack Notes held by sub-underwriters of the EastPack Notes offer. EastPack is the issuer of EastPack Notes.

#### 1. PRIMARY CONTACT DETAILS

For all correspondence regarding the EastPack Note Secondary Market Offer:

Applicant Name (Inv	vestment Ow	vner/Entity):			
Primary Contact (Or	ne Individual	):			
Postal Address:				Physical Address (if	different from Postal):
Postcode:					
Home Phone:				Mobile Phone:	
Email for the primar	Email for the primary contact:				

#### 2. NUMBER OF NOTES APPLIED FOR

The Note price is **\$1.00 per Note**. Applications must be for a **minimum of 20,000 Notes (\$20,000) and then upwards in \$10,000 increments**. Of the amount applied for 100% (\$1.00 per Note) is payable in full on application.

Number of Notes applied for:		Total Investment:	\$
	Payment due: (1	00% of Total Investment)	\$

#### **3. PAYMENT DETAILS**

Full payment is required on application. Please contact Louise Bignall to confirm bank account details for your payment.

#### 4. DEDUCTION OF WITHHOLDING TAX RATE ON INTEREST PAYMENTS

Please circle tax rate. Non notification will be taken as 45%. If exempt from Resident Withholding Tax, attach a copy of Certificate of Exemption:

Evenuet	10.5%	17.5%	28%	200/	220/	39%	Non-Resident	Resident Country:	
Exempt	10.5%	17.5%	20%	30%	33%	39%	Non-Resident	NRWT Rate:	

#### 5. BANK ACCOUNT DETAILS

Bank account details MUST be completed and match Investment Owner/Entity. Joint Individuals providing two accounts, complete pg 6.

Account Name(s):															
Account Number:															
	bar	nk	branch		 aco	count	num	ber			suff	fix			

## 6. ANTI MONEY LAUNDERING (AML) AUTHORITY

I/We agree to co-operate with MyFarm and EastPack Limited in complying with any and all of their obligations relating to the AML and any corresponding regulations including, but not limited to, providing them with such further information that they may require in order to discharge their obligations under the AML. I/We consent to the disclosure of the information contained in this Application (and of any further information that may be required by MyFarm and EastPack Limited) to third parties for that purpose. MyFarm and EastPack Limited reserves the right to reject any Application without completed AML requirements.

## 7. FINANCIAL MARKETS CONDUCT ACT 2013

The investing entity is (or is controlled by) an entity which (Tick ONE of the following):

- is an "investment business" as defined in Schedule 1, cl 37 of the FMCA. Certificate A (1. i)
- meets the investment criteria specified in Schedule 1, clause 38 of the FMCA. Certificate A (1. ii)
- is "large" as defined in Schedule 1, clause 39 of the FMCA. Certificate A (1. iii)
- is an "eligible investor" as defined in Schedule 1, clause 41 of the FMCA. Certificates B and C

#### 

The investing entity is:



а

b

c d

is investing a minimum of NZD \$750,000 upon acceptance in accordance with Schedule 1, clause 3(3)(b)(i) or (ii) of the FMCA. An Investor Certificate is <u>not</u> required.

#### If 'e' above applies I/We confirm that I/We understand that -

- the usual legal rules that require information to be given to investors for offers of financial products do not apply if the amount invested upfront by me/us (plus any other investments I/we have already made in those financial products) is \$750,000 or more; and
- I/We may not receive a complete and balanced set of information about this investment; and
- I/We have fewer legal protections for this investment; and
- I/We have been advised to ask questions, read all documents carefully, and seek independent financial advice.

Before any subscription can be considered for acceptance by the sub-underwriters of EastPack Notes in respect of this Secondary Market Offer, MyFarm on behalf of the sub-underwriters must be satisfied that the correct certificates forming part of the application have been completed.

### 8. PLEASE READ THIS BEFORE SIGNING

## **EASTPACK NOTES - SECONDARY MARKET OFFER**

The Product Disclosure Statement is available by contacting MyFarm at 0800 693276, or <u>investments@myfarm.co.nz</u>, or on <u>www.business.govt.nz/disclose</u>, and searching for offer number 13417.

#### I/We confirm that:

- a) I/We have received, read and understood a copy of the Product Disclosure Statement dated 4 November 2022 ("PDS").
- b) I/We acknowledge the Notes have been issued in accordance with the terms of the PDS, the Master Trust Deed and the Supplemental Trust Deed.
- c) Investment decisions are very important, and it has been made clear to me/us that I/we am/are free to take such other professional advice as is necessary. I/We have been provided with all the relevant information required to make the investment decision and have taken any advice that is appropriate.

#### d) I/We accept that I/We must make full payment totalling NZ \$1.00 per Note (100% of investment) with this application.

- e) I/We confirm that the owner/entity who takes up the investment, can make the payment as detailed above.
- f) I/We acknowledge that the completed application once submitted to EastPack and/or MyFarm, cannot be withdrawn without authorisation by EastPack and/or MyFarm.
- g) I/We acknowledge that EastPack and/or MyFarm reserves the right to accept any application and reject any application subject to its discretion.
- h) Under the terms of the Unsolicited Electronic Messages Act 2007, I/we provide my/our consent to receiving commercial electronic messages for the purpose of that Act.
- i) I/We agree that the terms of Notes described in the PDS, Master Trust Deed and Supplemental Trust Deed, or as otherwise disclosed to us will take effect from the date of issue of the Notes under the PDS and from that date I/We, together with all other applicants, will be a Noteholder and will be bound by the terms of the notes.
- j) Privacy Act 2020: The personal information that you provide to us by way of this application and any subsequent personal information you may provide in the future may be used by EastPack and/or MyFarm (and its related entities) for the purposes of arranging and managing your investment and to contact you in relation to your investment. You authorise EastPack and/or MyFarm to disclose your personal information to any third parties as required to perform services on your behalf; to regulatory bodies or law enforcement agencies as may be required by law; and otherwise, to meet the Company's regulatory obligation. You have the right to access all personal information that EastPack and/or MyFarm holds about you. If any of such information is incorrect you have the right to have it corrected.

### 9. DECLARATION AND SIGNATURE - ALL APPLICANTS TO COMPLETE

#### Please have all applicants sign below.

- a) I/We hereby apply for the number of Notes shown above and agree to accept such Notes on and subject to the terms and conditions set out in the PDS, Master Trust Deed and Supplemental Trust Deed and on the terms set out in the Application instructions.
- b) I/We understand that EastPack, MyFarm and/or the sub-underwriters of EastPack Notes will hold personal information in respect of me/us in relation to my/our investment in the EastPack Note Secondary Market Offer. I/We understand that I/we may request to see and, if necessary, request the correction of the personal information.
- c) I/We declare that all the details and statements made by me/us in this Application Form are complete and accurate.

Signature of Applicant:	Date:
Signature of Applicant:	Date:





## **EASTPACK NOTES - SECONDARY MARKET OFFER**

## PART TWO - APPLICATION FORM

EACH applicant must complete in full all sections relevant to their investment entity:

ONLY complete the relevant section for your investment entity (TYPE A, B, C, D or E):

- **Type A:** Individual
- □ Type B: Joint Individual
- □ Type C: Trust
- **Type D:** Company
- □ Type E: Partnership

### 10. ENTITY TYPE A: INDIVIDUAL

Please fill out <u>all</u> areas and answer <u>all</u> questions.

<u>APPLICANT</u> – Individual I	Details											
Legal FIRST Names(s)		Legal FAMILY Na	ime	IRD	Num	ber *	Requii	red				
Preferred Name												
Date of Birth (DD/MM/YYYY)	Place of Bir	th (Town/City):	Country of Birth:	Are	you a	a Nev	Zeal	and C	itizen	? Circ	cle on	е
					Y	es			No			
Email *Required												
Physical Street Address:												
RD/PO Box No.			Suburb:									
Town/City:			Region:									
Postcode:			Country:									
Postcode: Phone (mobile) *Required:			Phone (home/work):									

## 11. ENTITY TYPE B: JOINT INDIVIDUAL

#### % Share Income to be Attributed to Each Applicant:

Each party in a "Joint Individual" ownership is required to provide their individual IRD numbers, along with the % of the investment returns that is to be attributed to them.

#### **Bank Account Details:**

- If investment returns are being paid to one JOINT bank account, please ensure this information is provided in PART ONE.
- If Investment returns are to be paid to EACH Joint Individual separately, please complete BOTH boxes below.

<u>APPLICANT 1</u> - I	ndividual D	etails									
Legal FIRST Names	(s)		Legal FAN	IILY Nam	e	IRD Num	nber *Req	quired			
	Preferred N	Name									
Date of Birth (DD/MM/YYYY)	Place of Birt	th (Town/	City):	Countr	y of Birth:	Are you	a New Ze	ealand (	Citizen?	1	
							Circle on	е	Yes	No	0
Email *Required											
Physical Street Add	ress:										
RD/PO Box No.					Suburb:						
Town/City:					Region:						
Postcode:					Country:						
Phone (mobile) *Req	uired:				Phone (home/work):						
Share of Income (%)	):										
APPLICANT 1 - E	Rank Accou	int Deta	ile								
Account Name(s):		int Deta	115				% Ret	urn:			
Account Name(s).						/01/01					
Account Number:	Account Number:			anch	Account N	Jumber				Suffix	
		Bank	Br		7.000011(1	tarribor				Gamix	
APPLICANT 2 - Individual Detail			· · · · · · · · · · · · · · · · · · ·			ŗ					
APPLICANT 2 - I Legal FIRST Names		etails	Legal FAN	IILY Nam	e	IRD Num	nber *Red	quired			1
	(s)		Legal FAN	IILY Nam	lê	IRD Num	nber *Req	quired			
Legal FIRST Names			Legal FAN	IILY Nam	le	IRD Num	nber *Rec	quired			
	(s)	Name			ie y of Birth:	IRD Nurr			Citizen?		
Legal FIRST Names Date of Birth	(s) Preferred I	Name						ealand (	Citizen? Yes	, , ,	0
Legal FIRST Names Date of Birth	(s) Preferred I	Name					a New Ze	ealand (			)
Legal FIRST Names Date of Birth (DD/MM/YYYY)	(s) Preferred I Place of Birt	Name					a New Ze	ealand (			0
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required	(s) Preferred I Place of Birt	Name					a New Ze	ealand (			D
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required Physical Street Add	(s) Preferred I Place of Birt	Name			y of Birth:		a New Ze	ealand (			) )
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required Physical Street Add RD/PO Box No.	(s) Preferred I Place of Birt	Name			y of Birth: Suburb:		a New Ze	ealand (			D
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required Physical Street Add RD/PO Box No. Town/City:	(s) Preferred I Place of Birt ress:	Name			y of Birth: Suburb: Region:		a New Ze	ealand (			D
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required Physical Street Add RD/PO Box No. Town/City: Postcode:	(s) Preferred I Place of Birt ress: uired:	Name			y of Birth: Suburb: Region: Country:		a New Ze	ealand (			D
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required Physical Street Add RD/PO Box No. Town/City: Postcode: Phone (mobile) *Req Share of Income (%)	(s) Preferred I Place of Birt ress: uired: ):	Name th (Town/	City):		y of Birth: Suburb: Region: Country:		a New Ze	ealand (			
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required Physical Street Add RD/PO Box No. Town/City: Postcode: Phone (mobile) *Req Share of Income (%) <u>APPLICANT 2</u> - B	(s) Preferred I Place of Birt ress: uired: ):	Name th (Town/	City):		y of Birth: Suburb: Region: Country:		a New Ze	ealand (			
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required Physical Street Add RD/PO Box No. Town/City: Postcode: Phone (mobile) *Req Share of Income (%)	(s) Preferred I Place of Birt ress: uired: ):	Name th (Town/	City):		y of Birth: Suburb: Region: Country:		a New Ze	ealand (			D
Legal FIRST Names Date of Birth (DD/MM/YYYY) Email *Required Physical Street Add RD/PO Box No. Town/City: Postcode: Phone (mobile) *Req Share of Income (%) APPLICANT 2 - B	(s) Preferred I Place of Birt ress: uired: ):	Name th (Town/	City):		y of Birth: Suburb: Region: Country: Phone (home/work):		a New Ze	ealand (			

## 12. ENTITY TYPE C: TRUST

Please fill out <u>all</u> areas and answer <u>all</u> questions.

TRUST DETAILS												
Trust Name				Tru	st IRD	Num	ber: *	Requ	ired			
Physical Street Address:												
RD/PO Box No:			Suburb:									
Town/City:												
Postcode:												
Primary Contact for Trust: (Name	Primary Contact for Trust: (Name and Email address)											
Trust Accountant: (Name and Em	nail address)											
Trust Lawyer: (Name and Email a	ddress)											
Trust Beneficiaries (Including all	children and grandchild	dren a	at the time of application):									
Please state the Full Name and Da	te of Birth of <u>ALL</u> Benefici	iaries -	– AML/CFT Act 2009 – * <b>Requ</b>	ired								
Full Name – Use additional page if	f required					Da	te of I	Birth				

Please continue with your trust application on the following pages for each trustee. Please fill out all areas, answer all questions and print extra pages for additional individual Trustees as required.

Please complete Corporate Trustee Details on Pages 9-10.

## TRUST: Individual Details for Each Trustee

Please fill out <u>all</u> areas, answer <u>all</u> questions and print extra pages for additional individual Trustees as required.

TRUSTEE 1 – Individual Details											
Legal FIRST Names(s)	Legal FAMILY Name			IRD	Num	ber					
Date of Birth	Place of Birth (Town/City):	Are	you a	New	Zeala	and C	itizen	?			
	Circle one Yes								i	No	
Email *Required											
Physical Street Address:											
RD/PO Box No./Suburb:			Tow	n/City	<b>/</b> :						
Postcode:	Country:										
Phone (mobile) *Required:	Phone (home/work):										
If you hold dual Citizenship, please spec	cify which Countries you ho	Id Citizenship for:									

TRUSTEE 2 – Individual Details												
Legal FIRST Names(s)	Legal FAMILY Name			RD N	lumb	ber						
Date of Birth	Place of Birth (Town/City):	: A	Are y	ou a	New	Zeala	and C	itizen	?			
					Ci	rcle or	ne	Ye	5	No	,	
Email *Required												
Physical Street Address:												
RD/PO Box No./Suburb:			Town/	City:	:							
Postcode:	Country:											
Phone (mobile) *Required:	Phone (home/work):											
If you hold dual Citizenship, please spec	cify which Countries you ho	Id Citizenship for:										

## TRUSTEE 3 – Individual Details

Legal FIRST Names(s)	Legal FAMILY Name		_	IRD Number		
Date of Birth	Place of Birth (Town/City):	Country of Birth:		Are you a New Zealand	Citizen?	_
				Circle one	Yes	No
Email *Required						
Physical Street Address:						
RD/PO Box No./Suburb:			Tow	vn/City:		
Postcode:			Cou	intry:		
Phone (mobile) *Required:			one (home/work):			
If you hold dual Citizenship, please spe	cify which Countries you ho	old Citizenship for:				

## TRUST: Corporate Trustee/Trustee Company Details

Please fill out <u>all</u> areas and answer <u>all</u> questions. Please print additional pages for <u>ALL</u> Directors and >25% Shareholders as required.

_		_ ·													
CORPORATE TRUS	STEE														
Corporate Trustee/Tr	ustee Cor	npany Nai	me				Com	pany	Numb	er					
Country of incorporatio (Circle if applicable)	on:	New	Zealand		Australia		Com	ipany	IRD N	0:					
Other (please specify col incorporation)	untry of			·											
Physical Street Address	S:										•				
RD/PO Box No./Suburb	:				Town/City:										
Postcode:					Country:										
List the Directors of the	Corporate	Trustee w	ho are to b	e record	led as the primary "A	uthor	ised P	Person	s" for	this 1	rust				
Legal FIRST Names(s)			Legal FA	MILY N	ame	Ema	il Add	lress							
CORPORATE TRUS	STEE DIR	ECTOR 1	<u>l</u> – Individ	dual D	etails										
Legal FIRST Names(s)			Legal FAI	MILY Na	me		IRD	Num	ber						
Date of Birth	Place of E	Birth (Town	/City):	Coun	try of Birth:		Are	you a	New	Zeala	nd Citi	izen?		1	
							Circle one Yes No								
Email *Required															
Physical Street Address	S:														
RD/PO Box No./Suburb	:				Town/City:										
Postcode:					Country:										
Phone (mobile) *Require	ed				Phone (home/work)										
If you hold dual Citizens	ship, pleas	e specify w	hich Coun	tries yo	u hold Citizenship for	r:									
CORPORATE TRUS	RATE TRUSTEE DIRECTOR 2 – Individual Details														
Legal FIRST Names(s)		Legal FAMILY Name						Num	ber						
Date of Birth	Place of E	Birth (Town	/City):	Coun	try of Birth:		Are	you a	New	Zeala	nd Citi	izen?	1	1	
								Circle	one		Yes		No		

					100	
Email *Required						
Physical Street Address	<b>S</b> :					
RD/PO Box No./Suburb	:			Town/City:		
Postcode:				Country:		
Phone (mobile) *Require	əd			Phone (home/work)		
If you hold dual Citizens	ship, pleas	e specify which Count	ries you	I hold Citizenship for:		

CORPORATE TRU	STEE DIF	<u>OLDER</u> – Individual D	etails	5										
Legal FIRST Names(s)			Legal FA	MILY Na	me	IRD	Num	ber						
Date of Birth	Place of I	Birth (Town	/City):	Count	ry of Birth:	Are	you a	a New	Zeal	and C	Citizer	1?		
				(	Circle	one		Yes			No			
Email *Required														
Physical Street Addres	S:													
RD/PO Box No./Suburb	):				Town/City:									
Postcode: Country:														
Phone (mobile) *Required: Phone: (home/work):														
If you hold dual Citizen	f you hold dual Citizenship, please specify which Countries you hold Citizenship for:													

## 13. ENTITY TYPE D: COMPANY

**Complete BOTH sections:** "Company Details" and a "Company Director or Shareholder Details" section for ALL Directors and Shareholders owning 25% or more of the Company (Beneficial Owners).

#### Please fill out <u>all</u> areas and answer <u>all</u> questions.

COMPANY DETAILS											
Company Name:				Corr	npany	Numb	er				
Country of incorporation: (Please circle if applicable)	New Zealand		Australia	Corr	npany	IRD N	<b>o.</b> *Re	quired			
Other (Specify country of incorporation)											
Physical Street Address:											
RD/PO Box No./Suburb:			Town/City:								
Postcode:			Country:								
Company Accountant (Name and email)											
Company Accountant (Name and email)											
List ALL Company Directors plus ALL If any >25% Shareholder is a Trust or				ction. L	Jse an	other p	oage if	require	əd.		
Full Name		Rela	tionship to the Company					Pei	rcenta	ge He	ld

## **COMPANY: Individual Details for Each Director**

## Please print additional pages for <u>ALL</u> Directors and >25% Shareholders as required.

COMPANY DIRECT	COMPANY DIRECTOR 1 – Individual Details													
Legal FIRST Names(s)			Legal FA	MILY Na	me	IRD	Num	ber						
Date of Birth	Place of I	Birth (Towr	n/City):	Count	ry of Birth:	Are	you a	a New	/ Zea	land (	Citizeı	1?		
						(	Circle	one		Yes			No	
Email *Required														
Physical Street Addres	S:													
RD/PO Box No./Suburb	):				Town/City:									
Postcode:				Country:										
Phone (mobile) *Requir			Phone (home/work)											
f you hold dual Citizenship, please specify which Countries you hold Citizenship for:														

COMPANY DIRECT	<u> DMPANY DIRECTOR 2 – Individual Details</u>													
Legal FIRST Names(s)			Legal FA	MILY Na	me	IRD	Num	ber						
Date of Birth	Place of I	Birth (Town	/City):	Count	ry of Birth:	Are	you	a New	Zeal	and (	Citizer	ו?		
							Circle	one		Yes			No	
Email *Required														
Physical Street Addres	S:													
RD/PO Box No./Suburb	):				Town/City:									
Postcode:					Country:									
Phone (mobile) *Required         Phone (home/work)														
If you hold dual Citizen	f you hold dual Citizenship, please specify which Countries you hold Citizenship for:													

COMPANY DIRECT	OMPANY DIRECTOR >25% SHAREHOLDER – Individual Details													
Legal FIRST Names(s)			Legal FA	MILY Na	me	IRD	Num	ber						
Date of Birth	Place of I	Birth (Town	/City):	Count	ry of Birth:	Are	you	a New	Zeal	and (	Citize	n?		
					(	Circle	one		Yes			No		
Email *Required														
Physical Street Addres														
RD/PO Box No./Suburb	):				Town/City:									
Postcode:					Country:									
Phone (mobile) *Requir	ed:			Phone: (home/work):										
If you hold dual Citizen	f you hold dual Citizenship, please specify which Countries you hold Citizenship for:													

## 14. ENTITY TYPE E: PARTNERSHIP

## Complete BOTH sections – "Partnership Details" and a "Partner Details" section for <u>ALL</u> Partners.

If the Partners are one or more Trust(s) or Company(ies) please use the relevant sections of the application form, i.e. Trust(s) (7-10) or Company(ies) or (pages 10-11).

PARTNERSHIP DETAILS										
Partnership Name:			Regi	istratio	on Nui	nber				
Partnership Trading Name (if different	nt)		IRD	<b>No.</b> *F	Require	d				
Place of Registration: (Circle One if applicable)	New Zealand	Australia								
Other (Specify country of registration)										
Physical Street Address:										
RD/PO Box No./Suburb:										
Postcode:		Country:								
Partnership Accountant (Name and email)										
Partnership Accountant (Name and email)										
List ALL Partners and their percentage % ownership of the Partnership If any >25% Partner is a Trust or Company, complete their details in the relevant section of this Application Form. Use another page if required.										ed.
Full Name	Perce	entage	Held							

## PARTNERSHIP: Individual Details for Each Partner

Please print additional pages for <u>ALL</u> >25% Partners as required.

PARTNER 1 - Indiv	idual Det													
Legal FIRST Names(s)			Legal FA	MILY Na	me	IRD	Num	ber						
Date of Birth	Place of I	Birth (Towr	/City):	Count	ry of Birth:	Are	you	a New	/ Zea	land (	Citizer	1?		
						Circle	one		Yes			No		
Email *Required														
Physical Street Addres	s:													
RD/PO Box No./Suburb	:				Town/City:									
Postcode:				Country:										
Phone (mobile) *Required					Phone (home/work)									
f you hold dual Citizenship, please specify which Countries you hold Citizenship for:														

PARTNER 2 – Individual Details											
Legal FIRST Names(s)			Legal FA	MILY Na	me	IRD	Num	ber			
Date of Birth	Place of I	Birth (Town	/City):	Count	ry of Birth:	Are you a New Zealand Citizen?					
					(	Circle	one	Yes	3	No	
Email *Required								-			
Physical Street Address											
RD/PO Box No./Suburb	:				Town/City:						
Postcode:				Country:							
Phone (mobile) *Require				Phone (home/work)							
f you hold dual Citizenship, please specify which Countries you hold Citizenship for:											

<u>PARTNER 3 –</u> Indiv	<u> ARTNER 3 –</u> Individual Details													
Legal FIRST Names(s)			Legal FAI	MILY Na	me	IRD	Num	ber						
Date of Birth	Place of I	Birth (Town	/City):	Count	ry of Birth:	Are	you a	a New	Zeal	and (	Citizer	1?		
						(	Circle	one		Yes			No	
Email *Required														
Physical Street Addres	S:													
RD/PO Box No./Suburb	:				Town/City:									
Postcode:					Country:									
Phone (mobile) *Required:					Phone: (home/work):									
If you hold dual Citizenship, please specify which Countries you hold Citizenship for:														

# **INVESTOR CERTIFICATES**

# PART THREE

## PLEASE COMPLETE AN INVESTOR CERTIFICATE FOR EACH ENTITY

Please read the instructions below carefully to ensure that you provide all of the documentation required to meet the requirements of Schedule 1, clauses 3(2)(a) - (c) or (3)(3)(a)- (b)(ii) (inclusive) of the Financial Markets Conduct Act 2013 ("FMCA").

Before any subscription can be considered (as AGAINST received) for acceptance by MyFarm or the sub-underwriters of the EastPack Notes Offer (the Offeror) in respect of the Secondary Market offer of EastPack Notes, the investing party (and potentially their financial or legal adviser) will be required to complete one of the following Certificates:

Details of the requirements for a "Wholesale Investor" and an "Eligible Investor" are explained in the diagram below.

Certificate A (1. i)	Certificate A (1. ii)	Certificate A (1. iii)
An "Investment Business"	Meets "Investment Criteria"	A "Large" Investor
Schedule 1, Clause 3(2)(a) FMCA Act	<ul> <li>Schedule 1, Clause 3(2)(b) FMCA Act</li> <li>a. In the last 2 years owns a portfolio of "specified financial products" of \$1 m+</li> <li>b. In the last 2 years carried out transactions to acquire \$1 m+ of "specified financial products"</li> <li>NB: Excludes Category 2 products</li> </ul>	<ul> <li>Schedule 1, Clause 3(2)(c) FMCA</li> <li>Act</li> <li>a. In the last 2 years owned/controlled net assets c \$5 m+</li> <li>b. In the last 2 years had turnover of \$5 m+</li> </ul>

AND



## CERTIFICATE B "Eligible Investor"

Schedule 1, Clause 3(3)(a)

Has experience in buying and selling financial products sufficient to assess:

- a. The merits and risks of the investment
- b. The information required to assess the investment
- c. The adequacy of the information provided by MyFarm

## **CERTIFICATE C**

Completed by either:

- Chartered accountant
- Lawyer
- Financial advisor
- Confirms the certification made in completed Certificate B
- Confirms the investor has been sufficiently advised of the consequences of completing Certificate B
- Confirms there is no reason to believe the contents of Certificate B are incorrect

If you have any doubts about your eligibility for this offer or the certificates required, please contact our team: investments@myfarm.co.nz.

• Please note: If you have invested with MyFarm within the last two years you may not need to provide a Wholesale Investor Certificate.

Please contact MyFarm: investments@myfarm.co.nz, to confirm if the Wholesale Investor Certificate utilised for your most recent MyFarm investment is current and able to be used for the EastPack Notes - Secondary Market Offer.

• For all <u>new applicants</u> MyFarm will require a valid Wholesale Investor certificate to be completed and approved.

## 15. CERTIFICATE A (1. i – iii inclusive) – WHOLESALE INVESTOR CERTIFICATE

This certificate is required to verify that the investor meets the respective eligibility requirements as a "Wholesale Investor" under Schedule 1, clause 3(2)(a) - (c) of the FMCA and accordingly confirm that neither meets the eligibility requirements as an "Eligible Investor" under Schedule 1, clause 3(3)(a) of the FMCA and accordingly confirm that neither MyFarm, the sub-underwriters of the EastPack Notes offer, nor EastPack Limited are required to make disclosures in respect of this offer under Part 3 of the FMCA.

In relation to the Secondary Market Offer by the sub-underwriters of the EastPack Note offer ("the financial product" or	۱
offer and "the transaction"), that:	

1) I/WE,

("the Investor")

HEREBY CERTIFY THAT I am/we are a Wholesale Investor under Schedule 1, clause 3(2) of the FMCA of the following kind (tick one of the following):

i. 🗆	Sch.1, Clause 3(2)(a): An "investment business	" as defined in Schedule 1, cl 37 of the FMCA
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ii. Sch. 1, Clause 3(2)(b): I/We meet the investment criteria specified in Schedule 1, clause 38 of the FMCA

iii. 🗆	Sch. 1, Clause 3(2)(c): A "large" investor as defined in Schedule 1, clause 39 of the FMCA.
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2) The grounds on which I/we claim that one of the above applies is (a brief description is mandatory):

THIS SECTION MUST BE COMPLET	ED				
3) I/We do understand the consequences of certifying myself or ourselves to be a Wholesale Investor.					
Signed at:	_this	day of	_2023.		
Signature:			_(the Investor)		

#### WARNING:

The law normally requires people who offer financial products to give information to investors before they invest. This information is designed to help investors make an informed decision.

If you are a wholesale investor, the usual rules do not apply to offers of financial products made to you. As a result, you may not receive a complete and balanced set of information. You will also have fewer other legal protections for these investments. Ask questions, read all documents carefully, and seek independent financial advice before committing yourself.

#### Offence

It is an offence to give a certificate knowing that it is false or misleading in a material particular. The offence has a penalty of a fine not exceeding \$50,000

## 15. CERTIFICATE B – ELIGIBLE INVESTOR CERTIFICATE

#### This certificate requires the completion of Certificate C – Confirmation of Certification on the following page.

This Certificate and Confirmation (in the form of Certificate C on the following page) is required to verify that the investor meets the eligibility requirements as an "Eligible Investor" under Schedule 1, clause 3(3)(a) of the FMCA and accordingly confirm that neither MyFarm, the subunderwriters of the EastPack Notes Offer, nor EastPack Limited are required to make disclosure in respect of this offer under Part 3 of the FMCA.

In relation to the <b>Secondary Market Offer by the sub-underwriters of the EastPack Note offer</b> ("the Financial Product" on offer and "the transaction")						
I/We,	("the Investor")					
<ul> <li>CERTIFY THAT:</li> <li>1. I/We have previous experience in acquiring or disposing of financial products* that allows me/us to assess: <ul> <li>a. The merits of the transaction, including assessing the value and the risks of the financial products involved; and</li> <li>b. My/Our own information needs in relation to the transaction; and</li> <li>c. The adequacy of the information provided by the sub-underwriters of EastPack Notes Offeror</li> </ul> </li> <li>2. I/We do understand the consequences of certifying myself/ourselves to be an Eligible Investor.</li> <li>3. The grounds for this certification are (a brief description is mandatory). THIS SECTION MUST BE COMPLETED</li> </ul>						
Signed at:thisday of2023.						
Signature:(the In	ivestor)					

\*A debt or equity security, a managed investment product or a derivative.

#### WARNING:

The law normally requires people who offer financial products to give information to investors before they invest. This information is designed to help investors make an informed decision.

If you are a wholesale investor, the usual rules do not apply to offers of financial products made to you. As a result, you may not receive a complete and balanced set of information. You will also have fewer other legal protections for these investments. Ask questions, read all documents carefully, and seek independent financial advice before committing yourself.

#### Offence

It is an offence to give a certificate knowing that it is false or misleading in a material particular. The offence has a penalty of a fine not exceeding \$50,000.

### NOTE: CERTIFICATE B WILL NOT BE ACCEPTED WITHOUT CERTIFICATE C

## 16. CERTIFICATE C - CONFIRMATION OF CERTIFICATION

This certificate and confirmation are required to verify that the investor meets the eligibility requirements as an "Eligible Investor" under Schedule 1, clause 3(3)(a) of the FMCA and accordingly confirm that neither MyFarm (as Offeror), the sub-underwriters of the EastPack Notes Offer, nor EastPack Limited (as Issuer) are required to make disclosure in respect of this offer under Part 3 of the FMCA.

# Please Note: by signing this Certificate C you are confirming that you have sighted the investor's information used in Certificate B and that you have advised the investor in respect of these certificates.

I,as a financial advisor / chartered accountant / lawyer							
Certify that I have considered("the Investor")							
grounds for his/her/their certification and I:							
1. Am satisfied that the Investor has been sufficiently advised of the consequences of the certification, and:							
	<ol> <li>Have no reason to believe that the certification is incorrect or that further information or investigation is required as to whether or not the certification is correct.</li> </ol>						
Signed at:	this	day of	2023.				
Siznatura							
Signature:							
CONFIRMING CERTIFIER: financial adviser / chartered accountant / lawyer (please circle)							

#### WARNING:

The law normally requires people who offer financial products to give information to investors before they invest. This information is designed to help investors make an informed decision.

If you are a wholesale investor, the usual rules do not apply to offers of financial products made to you. As a result, you may not receive a complete and balanced set of information. You will also have fewer other legal protections for these investments.

Ask questions, read all documents carefully, and seek independent financial advice before committing yourself.

#### Offence

It is an offence to give a certificate knowing that it is false or misleading in a material particular. The offence has a penalty of a fine not exceeding \$50,000.