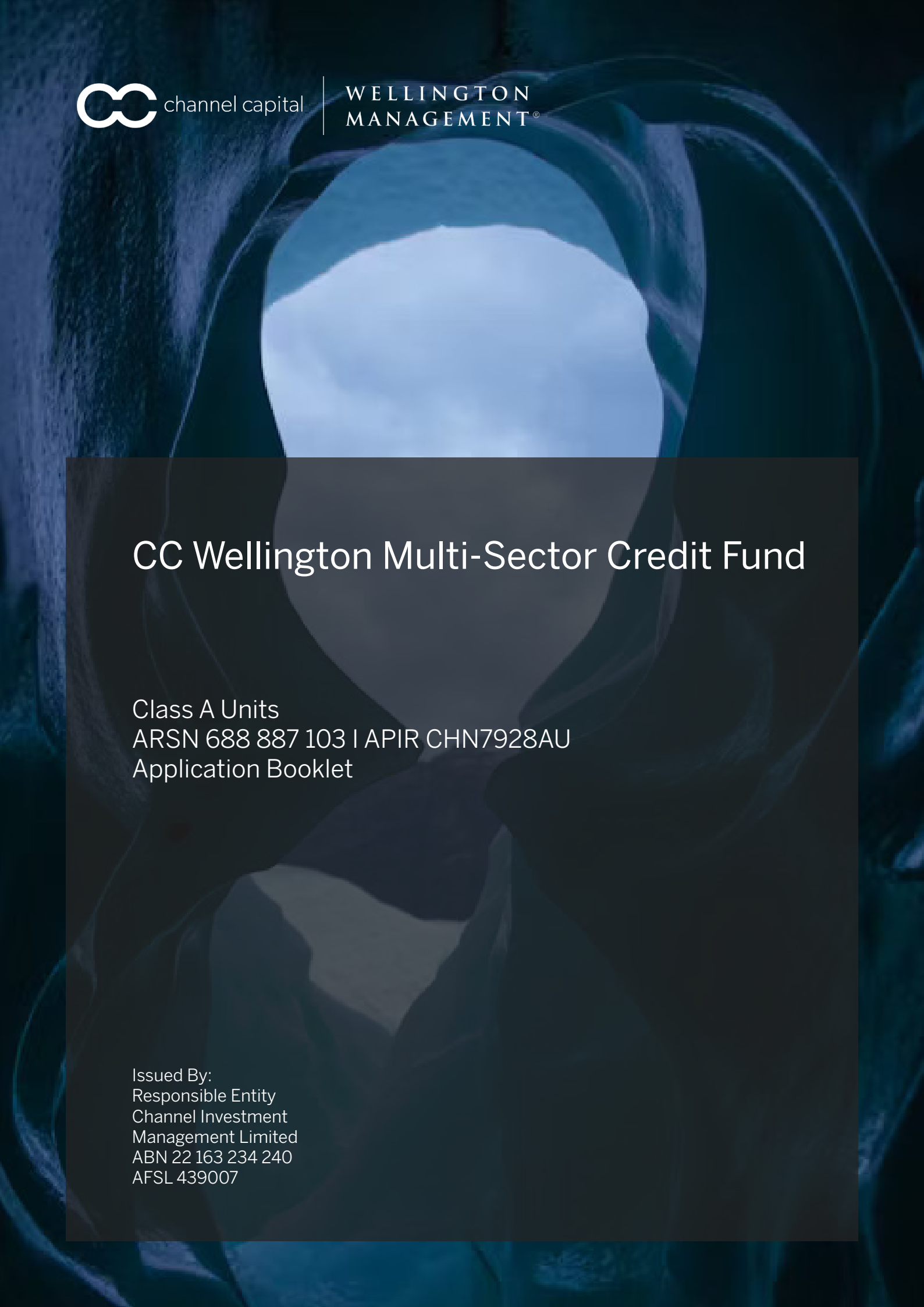


channel capital | WELLINGTON MANAGEMENT®

CC Wellington Multi-Sector Credit Fund

Class A Units
ARSN 688 887 103 I APIR CHN7928AU
Application Booklet

Issued By:
Responsible Entity
Channel Investment
Management Limited
ABN 22 163 234 240
AFSL 439007

Now Accepting Online Applications

We encourage investors to apply for our Funds via our online application form, which can be accessed via the link below:

https://www.channelcapital.com.au/invest

The online system significantly streamlines the application process by reducing paperwork, increasing efficiency, and offers a smoother experience for both direct investors and advisers. With automated onboarding and instant AML/KYC*, applications can be completed quickly and securely.

Please contact Channel's Client Services if you require assistance on 1800 940 599 or email clientservices@channelcapital.com.au.

*In some cases, instant AML/KYC may not be achieved.

Application Booklet

Completing the Application Form

A completed application is an instruction to invest in the CC Wellington Multi-Sector Credit Fund. This application form relates to the Product Disclosure Statement dated 20 November 2026 ('PDS') issued by Channel Investment Management Limited ACN 163 234 240 AFSL 439007 ('CIML' or 'Responsible Entity'). Please read the PDS in full before completing this Application Form.

Incomplete Applications

Application monies accompanying an incomplete application will be retained in a trust account pending receipt of the required information. Interest earned on these application monies will form part of the Fund. Units will not be issued as a result of the interest earned.

Tax File Number

Investors have the choice of whether or not to quote their Tax File Number (TFN) when opening a Fund account. The investor does not have to quote a TFN, but it is a requirement of relevant taxation laws that CIML will withhold tax (plus Medicare levy) from income distributions to the investor if they have not quoted their TFN or provided appropriate exemption information. Collection of TFN information is authorised, and its use and disclosure are strictly regulated by, taxation and privacy laws. If you are exempt from quoting a TFN, please quote the equivalent ATO code in the TFN space provided (e.g. Aged pension is 444 - 444 - 441).

Additional Applications

Additional investments can be made at any time by sending a completed additional unit application form, together with your electronic funds transfer (EFT) confirmation. It is not necessary for you to complete another Application Form. A copy of the additional unit application form is located at the back of this Application Booklet.

Submitting the Application Form

Apex Fund Services
Attn: Unit Registry
GPO Box 4968
Sydney, NSW, 2001

Need help completing the Application Form?

Contact Channel Client Services
T: 1800 940 599
E: clientservices@channelcapital.com.au

Power of Attorney

If signing under a power of attorney, you are certifying that the power of attorney has not been revoked (a certified copy of power of attorney must be submitted with this application unless it has already been sighted). For the purposes of anti-money laundering and counter- terrorism laws, the attorney must complete the same identification requirements as an individual (see PART F - Section A).

Anti-Money Laundering/Counter-Terrorism Financing

Under anti-money laundering and counter-terrorism financing laws, we are required to collect and verify certain information about investors including, if appropriate, the beneficial owners of investors. Without this information, we may refuse to process the application until the requested information has been received or refuse to accept the application altogether. We may also refuse to process a transaction in relation to your investments, or delay or block or refuse a transaction, where we have reasonable grounds for believing that the transaction will breach relevant laws.

Wholesale Investor

If you are applying to invest $500,000 or more, you will automatically be deemed a wholesale investor and no additional documentation is required.

If you are an Australian investor investing less than $500,000, additional documentation will be required to certify that you are a wholesale investor. Provided you are not acquiring the product in connection with a business, a current qualified accountant's certificate is required. It must be issued within the preceding 2 years, stating that you have either net assets of at least A $2.5 million (which may include the net assets of a company or trust controlled by you) or gross income for each of the last two financial years of at least A$250,000 (which may include the gross income of a company or trust controlled by you). Refer to PART E on page 15 for a Wholesale Investor Certificate template.

**NOTE: The above does not apply if you are a New Zealand investor. If you are a New Zealand investor, please contact Apex Fund Services Pty Ltd for more information on the requirements for New Zealand wholesale investor certification.

Politically Exposed Persons (PEP)

Under anti-money laundering and counter terrorism laws, we are required to ask you whether you are a PEP meaning an individual:

1. who holds a prominent public position or function in a government body or an international organisation, including:
    a. Head of State or head of a country or government; or
    b. government minister or equivalent senior politician; or
    c. senior government official; or
    d. Judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge of a court equivalent seniority in a foreign country or international organisation; or
    e. governor of a central bank or any other position that has comparable influence to the Governor of the Reserve Bank of Australia; or
    f. senior foreign representative, ambassador, or high commissioner; or

g. high-ranking member of the armed forces; or

h. board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation; and

2. an immediate family member of a person referred to in paragraph (1), including:
   a. a spouse; or
   b. a de facto partner; or
   c. a child and a child's spouse or de factor partner; or
   d. a parent; and
3. a close associate of a person referred to in paragraph (1), which means any individual who is known (having regard to information that is public or readily available) to have:
   a. joint beneficial ownership of a legal entity or legal arrangement with a person referred to in paragraph (1); or
   b. sole benefit of a person described in paragraph (1).

Privacy

CIML has a Board approved privacy policy. We collect and manage your personal information in accordance with this policy, the Privacy Act 1998 (Cth) and the Australian Privacy Principles ('APP').

CIML may collect personal information from you in the application and any other relevant forms in order to process your application, administer your investment and for other purpose permitted under the Privacy Act 1988 (Cth). Tax, company and anti-money laundering law also require some of the information to be collected in connection with an application. In some cases, we collect personal information from third parties including public sources, our related companies, referrers, brokers, agents, your adviser(s) and our service providers.

If you do not provide us with your relevant personal information, we will not be able to provide you with products or services (such as issuing you units). Privacy laws apply to our handling of personal information and we will collect, use and disclose your personal information in accordance with our privacy policy, which includes details about the following matters:

- the kinds of personal information we collect and hold;
- how we collect and hold personal information;
- whether collection is required or authorised by law;
- the purposes for which we collect, hold, use and disclose personal information;
- the entities or persons to which personal information is usually disclosed;
- how you may access personal information that we hold about you and seek correction of such information (note that exceptions apply in some circumstances);
- how you may complain about a breach of the APPs, or a registered APP code (if any) that
- binds us, and how we will deal with such a complaint;
- whether we are likely to disclose personal information to overseas recipients and, if so,

the countries in which such recipients are likely to be located if it is practicable for us to specify those countries.

Personal information is unlikely to be disclosed to any third parties overseas.

CIML may also be allowed or obliged to disclose information by law. If an investor has concerns about the completeness or accuracy of the information CIML has about them or would like to access or amend personal information held by CIML, they can contact CIML's Privacy Officer at:

Attention: Privacy Officer
Channel Investment Management Limited
GPO Box 206
Brisbane QLD 4001
Phone: 1800 940 599
Email: privacy@channelcapital.com.au

Our privacy policy is publicly available at www.channelcapital.com.au or you can obtain a copy free of charge by contacting us.

If you are investing indirectly through an IDPS, we do not collect or hold your personal information in connection with your investment in the Fund. Please contact your IDPS operator for more information about their privacy policy.

Correct Forms of Registrable Names

An application must be signed in the name(s) of natural persons, companies or other legal entities. At least one name given in full and the surname is required for each natural person.

The name of the beneficiary or any other non-registrable name should be included by way of an account designation, completed as described in the examples of correct forms of registrable names below.

Type of Investor	Correct Form of Registrable Title
Individual or Joint Applicants Use given names in full Do not use initials	Mr John Alfred Smith and Mrs Mary Anne Smith
Partnerships Use partners' personal names Include the name of the partnership as account designation	Mr John Smith and Mr Michael Smith < John Smith and Son A/C >
Minor (a person under the age of 18) Use the name of the responsible adult Include the name of the minor as account designation	Mr John Smith < John Smith >
Company Use company title Do not use abbreviations	ABC Pty Ltd
Trusts Use trustee(s) personal name(s) or registered company name Include the name of the trust	Mrs Sue Smith < Sue Smith Family A/C >
Deceased Estates Use executor(s) personal name(s) Include the name of the deceased	Ms Jane Smith < Est John Smith A/C >
Association Use office bearer(s) personal name(s) Include the name of the club, etc.	Mr Michael Smith < ABC Tennis Association A/C >
Superannuation Funds Use name of trustees and fund Do not use the name of the fund only	Mr John Henry Smith and Mrs Susan Jane Smith < J & S Smith Super Fund A/C >
Co-operative Use name of co-operative Do not use abbreviations	ABC Co-operative Limited
Government Body Use name of government body	ABC Department or Department of ABC

Application Form Checklist

Please complete the sections of the application form that apply to you and then return the signed form with the relevant document(s) to the address provided.

Type of Investor	Sections to be Completed in Application Form		Verification Documentation Required
	PART A	PART B, C, D & E	PART F
Individual / Joint Applicants	Section 1	Complete all Sections in Part B & C (as applicable) Ensure Part D – Investor Declaration is signed by all required applicants Complete Part E – Wholesale Investor Certificate Declaration (as applicable)	Section A
Regulated Trust (e.g. SMSF) – Individual Trustee/s	Sections 1 & 3		Section B
Regulated Trust (e.g. SMSF) – Corporate Trustee	Sections 2a & 3		Section B
All Other Trust Types – Individual Trustee/s	Sections 1 (trustee and beneficial owners) & 3		Section H
All Other Trust Types – Corporate Trustee	Sections 1 (for beneficial owners), 2a & 3		Section H
Private and Unlisted/ Unlicensed Public Australian Company	Sections 1 (for beneficial owners) & 2a		Section C
Listed / Licenced Australian Company	Section 2a		Section E
Foreign Listed/Licenced Company (Australian Registered)	Sections 2a & 2b		Section D
Foreign Private and Unlisted/ Unlicensed Public Company (Australian registered)	Sections 1 (for trustees and beneficial owners), 2a & 2b		Section F
Foreign Company (not registered in Australia)	Sections 1 (for trustees and beneficial owners), 2a & 2b		Section G
Partnerships	Sections 1 & 4		Contact Channel
Association / Registered Co-operative / Government Body	Sections 1 (as applicable) & 5		Contact Channel
Minor / Deceased Estate	Sections 1 (for trustees) & 6		Sections A and J or I (as applicable)

CC Wellington Multi-Sector Credit Fund
CLASS A UNITS
APIR: CHN7928AU

APPLICATION FORM 20 November 2026

A completed application is an instruction to invest in the CC Wellington Multi-Sector Credit Fund. Please complete the sections of the form that apply to you and return the signed form with the relevant document/s to:

Apex Fund Services
Attn: Unit Registry
GPO Box 4968, Sydney, NSW, 2001

To proceed with this application, you must be deemed a wholesale investor. Please contact the Channel Client Service team if you require any further clarification on this requirement. Email clientservices@channelcapital.com.au or call 1800 940 599.

Please cross boxes where appropriate. ☒

PART A

Section 1

Investor Details Individual/Joint/ Trustee/Director/ Partner/25% or more Shareholder or Beneficial Owner

If there are more than (2) two Individuals, Partners, 25% or more shareholders or Beneficial Owners, please print additional pages.

Politically Exposed Persons (PEP) as defined on Page 3

Investor 1

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other (e.g. Dr) ☐

Given Name(s)

Surname

Date of Birth ☐☐ / ☐☐ / ☐☐☐☐

Residential Street Address

State | Postcode

Country

Are you, or is a family member, or close associate a PEP?

No ☐ Yes ☐ If yes, please provide details below

If you are a beneficial owner or controlling person indicate your role (such as managing director)

Are you an Australian resident for taxation purposes?

Yes ☐ No ☐

If yes, please provide your Tax File Number or Exemption Number.

☐☐☐☐☐☐☐☐☐

If no, please also complete section 12 of the application form as required.

Investor 2

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other (e.g. Dr) ☐

Given Name(s)

Surname

Date of Birth ☐☐ / ☐☐ / ☐☐☐☐

Residential Street Address

State | Postcode

Country

Are you, or is a family member, or close associate a PEP?

No ☐ Yes ☐ If yes, please provide details below

If you are a beneficial owner or controlling person indicate your role (such as managing director)

Are you an Australian resident for taxation purposes?

Yes ☐ No ☐

If yes, please provide your Tax File Number or Exemption Number.

☐☐☐☐☐☐☐☐☐

If no, please also complete section 12 of the application form as required.

Section 2 (a)

Company Details Private/Public

Name of Company (as registered with ASIC or foreign registration body)

Tax File Number or Exemption Number ☐☐☐☐☐☐☐☐☐

Other Identification Number

Australian Business Number ☐☐☐☐☐☐☐☐☐☐☐

Registered Address (PO Box NOT acceptable)

State | Postcode

Country

Principal Place of Management (if any)

State | Postcode

Country

☐ A Private Company ☐ A Public Company

☐ Other type of Company (please state)

For private companies, state the full name of each Director:

Director 1: | Director 2:

Director 3: | Director 4:

If there are more directors, provide details on a separate sheet and attach to your application form.

Please also complete Section 1 of this form for any shareholders with ownership of 25% or more, or if there is no shareholder with ownership of 25% or more, individuals who directly or indirectly control (includes exercising control through the capacity to determine decisions about financial or operational policies; or by means of arrangements, voting rights of 25% or more, or power of veto) the company, or if no such person exists, for each managing official or director of the Company.

Section 2(b)

Further Information for Foreign Companies

Business Address in Australia (if applicable)

State

Postcode

NOTE: Please also complete Section 1 of the form (attach additional page(s) if necessary) for all directors and/or shareholders who hold an interest of greater than 25%.

Country where company was formed, incorporated or registered:

If the company is registered by a foreign registration body, the name of the body and any registration number issued

Relevant foreign body:

Registration Number:

Section 3

Details Trust/ Superannuation Fund

Full name of Trust

Full business name (if any)

Country where Trust established

Tax File Number or Exemption Number

Type of Trust (Select one of the following trust types and provide the information requested):

☐ Registered management investment scheme

Provide Australian Registered Scheme Number (ARSN)

☐ Regulated trust (e.g. SMSF)

Provide name of regulator (e.g. ASIC, APRA, ATO)

Provide the Trust's ABN

or registration/licensing details

☐ Government superannuation fund

Provide name of the legislation establishing the Fund

☐ Other trust type

Trust description (e.g. Family, unit, charitable, estate)

Name of trust beneficiaries or details of the class of beneficiaries:

Number of Trustees**:

Full Name of Settlor*:

* Only required where initial contribution to the trust was greater than $10,000 (unless settlor is deceased).
**Note: Please complete Section 1 for each Individual Trustee and each beneficiary of the trust, or complete Section 2 for a Corporate Trustee.
Please also complete Section 1 for individuals who directly or indirectly control (see section 2(a) for what constitutes "control") an unregulated trust.

Section 4

Partnership Details

Name of Partnership

Full registered business name (if any) of Partnership

Country where Partnership established

NOTE: Please provide the full names and details for each of the Partners in Sections 1, 2, 3 or 4 of the form as required (attach extra page(s) if necessary).

Section 5

Association (including public or private ancillary funds)/ Registered Co-operative/ Government Body Details

Please cross type of Investor

☐ Association ☐ Registered Co-Operative ☐ Government Body

Name of Association/Registered Co-operative/Government Body

Tax File Number or Exemption Number

Other Identification Number

Australian Business Number

Registered Address

State Postcode Country

Principal place of business/operations address (if same as registered address, please write 'AS ABOVE').

State Postcode Country

Full name of the association's President, Secretary and Treasurer (or other equivalent officers in each case). This section is only to be completed by Associations.

Name of President

Name of Secretary

Name of Treasurer

Please complete Section 1 with the full names and details of the President, Secretary or Treasurer (attach additional page(s) if necessary) and provide ID for one of the officers.

The Government Body is an entity established under legislation of:

☐ Commonwealth of Australia

☐ State, territory or foreign country (if so, name of state, territory or foreign country)

Section 6

Minor/Deceased Estate

Please cross type of Investor (if applicable)

Account Designation: ☐ Minor ☐ Deceased Estate

Designation Name (full name of relevant minor or deceased person)

< A/C>

Please provide the full names and details of the relevant Trustee(s) by completing Section 1 of the form.

PART B

Section 7

Contact Details

These details will be used for all administration correspondence.

By providing your email address(es), you agree to receive all communications, including transaction confirmations, statements, reports and other notifications, by email.

Mailing Address

State Postcode

Country

Contact Phone

Email

As an investor in the Fund, you will receive market insights, performance updates and relevant Fund information. You may also receive additional marketing from the investment manager. If you do NOT wish to receive this, please email clientservices@channelcapital.com.au.

Section 8
Additional Enquirer

If you would like someone other than the Contact or your Adviser to be able to enquire about this investment, please provide us with their details here.

Given Name(s)

Surname

Date of Birth

/ /

Company (if applicable)

Section 9
Adviser Details

By completing this section you consent to give your financial adviser access to your account information.

Adviser Name

Adviser Company (if applicable)

Dealer Group Name

AFSL No.

Adviser Email

Adviser Phone

Section 10
Investment Details

Please note that application funds will not be invested until completed and signed Application Form is received and accepted. Minimum investment amount is $100,000.

Amount $

PAYMENT DETAILS

BSB	Account Number	Account Name	Reference
082 124	320782603	CC Wellington Multi-Sector Credit Fund Applications Account	Please include your Investor Name in the reference field of your EFT.

SOURCE OF FUNDS

Please cross the most relevant option.

- ☐ Retirement Savings
- ☐ Sale of Assets
- ☐ Financial Investments
- ☐ Employment Income
- ☐ Inheritance/gift
- ☐ Business Activities
- ☐ Other (provide detail)

Section 11
Nominated Account and Distribution Details

The following account will be credited for payment of distributions and redemptions (if applicable).

Account Name

Financial Institution

Branch

BSB (Branch) -

Account Number

INCOME DISTRIBUTION

Please specify how you would like any income distributions from the Fund to be paid. Income is reinvested automatically by the Responsible Entity unless otherwise instructed.

- ☐ Reinvested in the Fund
- ☐ Credit to my/our nominated account

PART C

FATCA and CRS – Self-certification Declaration

SMSF: Sections 12 and 13 do not need to be completed if you are a Regulated Australian Super Fund

Information about investors that are foreign tax residents must be reported to the Australian Tax Office (ATO) in accordance with international tax reporting standards and laws to which Australia is subject. These include the OECD Common Reporting Standard (CRS) and United States Foreign Account Tax Compliance Act (FATCA). If you require further information on Australia's obligations under CRS or FATCA, please visit the ATO website www.ato.gov.au

Tax Residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on their domicile, place of management, principal office or incorporation, the amount of time a person spends in a country, the location of a person's residence or place of work. For the US, tax residency can be as a result of citizenship or residency.

A TIN is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or a Social Security Number in the US. If a TIN is not provided, please list the reason (of the of the three reasons specified as A, B or C) for not providing a TIN.

Section 12

Individuals

Individual 1

Are you a tax resident of another country?

No ☐

Yes ☐ Please provide your name and Tax Identification Number (TIN) below:

	Country of Tax Residence	Tax Identification Number (TIN)	Reason Code if no TIN provided
1			
2			
3			

Reason A: The country of tax residency does not issue TINs to tax residents.
Reason B: The individual has not been issued with a TIN.
Reason C: The country of tax residency does not require the TIN to be disclosed.

Individual 2

Are you a tax resident of another country?

No ☐

Yes ☐ Please provide your name and Tax Identification Number (TIN) below:

	Country of Tax Residence	Tax Identification Number (TIN)	Reason Code if no TIN provided
1			
2			
3			

Reason A: The country of tax residency does not issue TINs to tax residents.
Reason B: The individual has not been issued with a TIN.
Reason C: The country of tax residency does not require the TIN to be disclosed.

Section 13a

Entities (Company, Trust, Partnership, Association, etc.)

Please select option 1, 2, 3 or 4 in this Section

Select the appropriate entity type from one of the four options below and provide requested information.

1. ☐ A Financial Institution (a custodial or depository institution, an investment entity or specified insurance company for FATCA/CRS purposes)

Provide the entity's Global Intermediary Identification Number (GIIN), if applicable

If the entity is a Financial Institution but does not have a GIIN, provide its FATCA status (select one)

- Deemed Compliant Financial Institution ☐
- Excepted Financial Institution ☐
- Exempt Beneficial Owner ☐
- Non-Reporting IGA Financial Institution ☐
- Non-participating Financial Institution ☐
- Other (describe the FATCA status in the box provided) ☐

Section 13a

Entities (Company, Trust, Partnership, Association, etc.)

Please answer the question below for all Financial Institutions

Is the Financial Institution an Investment Entity located in a Non-Participating CRS Jurisdiction and managed by another Financial Institution?

☐ Yes – Please see section 13b (Country of Tax Residency for Entity)

☐ No

---

2. ☐ Public Listed Company, Majority Owned Subsidiary of a Public Listed Company, Governmental Entity, International Organisation, Central Bank, an Australian Registered Charity or Deceased Estate.

3. ☐ A Foreign Charity or an Active Non-Financial Entity (NFE) (Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held produced passive income)

   For other types of Active NFEs, refer to section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at www.oecd.org)

   If the entity is a Foreign Charity or Active NFE, please proceed to section 13b (Country of Tax Residency for Entity).

4. ☐ Other (Entities that are not previously listed e.g. proprietary company – Passive Non-Financial Entities) Please see section 13b (Country of Tax Residency for Entity)

Section 13b

Country of Tax Residency for Entity

Is the entity a tax resident of a country other than Australia?

☐ No Please complete Section 13b.1

☐ Yes Please provide the entity's country of tax residency and tax identification number (TIN). Please include multiple countries and TINs, if applicable. If a TIN is not provided, please list the reason (of the of the three reasons specified as A, B or C) for not providing a TIN.

	Country of Tax Residence	Tax Identification Number (TIN)	Reason Code if no TIN provided
1			
2			
3			

Reason A: The country of tax residency doesn't issue TINs to tax residents.
Reason B: The individual has not been issued with a TIN.
Reason C: The country of tax residency does not require the TIN to be disclosed.

Section 13b.1

For Companies only - Are any of its beneficial owners tax residents of countries other than Australia?

☐ Yes - Please complete section 12 for those individuals ☐ No

For Unregulated Trusts only - Are any of its controlling persons (an individual who directly or indirectly exercises control over the Unregulated Trust, which includes all trustees, settlors, protectors and beneficiaries) tax residents of countries other than Australia?

☐ Yes - Please complete section 12 for those individuals ☐ No

If the Trustee is a company - Are any of the company's controlling persons (an individual who directly or indirectly exercises control over the Trustee company, which includes beneficial owners controlling more than 25% of the share in the company or senior managing officials) tax residents of countries other than Australia?

☐ Yes - Please complete section 12 for those individuals ☐ No

PART D

Investor Declaration

By completing and signing the Application Form, the investor acknowledges, agrees and consents as follows:

a. I/We have read and understood the PDS to which this application relates and agree to be bound by the provisions of the Fund Constitution;

b. I/We have received personally a complete and unaltered PDS prior to completing the Application Form and declare that all the details given in this Application Form are true and correct;

c. I/We confirm that I/we are in compliance with all relevant laws and regulations (including, without limitation, the requirements of the Corporations Act) and will not cease to be in compliance if I/we are allocated Units;

d. I/We authorise the use of the TFN information provided on the Application Form in respect to my/our investment;

e. I/We acknowledge that neither CIML, nor its associates, guarantee the capital invested by investors or the performance of the specific investments of the Fund;

f. I/We acknowledge that the provision of the products available through the Fund should not be taken as the giving of investment advice by CIML, as CIML is not aware of the investor's investment objectives, financial position or particular needs;

g. I/We acknowledge that I/we are responsible for ensuring that the information on the Application Form is complete and correct;

h. I/We have such knowledge and experience in financial and business matters that I/we are capable of evaluating the merits and risks of a purchase of the Units and I/we acknowledge that an investment in the Fund involves a degree of risk;

i. I/We have the financial ability to bear the economic risk of the investment in the Fund;

j. I/We have had access to all information that I/we believe is necessary or appropriate in connection with this application for Units. I/We acknowledge and agree that the only information and representations provided by CIML are those contained in the PDS to which this Application Form relates;

k. I/We have made and relied upon my/our own assessment of the Fund and have conducted my/our own investigation with respect to the Application and the Fund including, without limitation, the particular tax consequences of subscribing, owning or disposing of the Units in light of my/our particular situation as well as any consequences arising under the laws of any other taxing jurisdiction;

l. Except to the extent that liability cannot by law be excluded, I/we acknowledge that none of the directors, officers, employees or advisers of CIML or the Fund, or any of their respective related bodies corporate, accept any responsibility in relation to the Application;

m. I/We acknowledge that the Fund, CIML and its affiliates will rely upon the truth and accuracy of the foregoing acknowledgments, representations, warranties and agreements. I/We indemnify the Fund, CIML and their affiliates against any loss, damage or costs incurred and arising out of or in relation to any breach by me/us of the acknowledgments, representations, warranties and agreements;

n. I/We agree that CIML, may:

   i) require me/us to provide any additional documentation or other information and perform any acts to enable compliance with any laws relating to anti-money laundering and counter terrorism financing ('AML'), US Foreign Account Tax Compliance Act ('FATCA'), and the Common Reporting Standards ('CRS') or any other law or regulation;

   ii) at its absolute discretion and without notice to me/us, take any action it considers appropriate, including blocking or delaying transactions on my/our account or refuse to provide services to me/us to comply with any law relating to AML or any other law; and

   iii) in its absolute discretion and without notice to me/us, report any or any proposed transaction or activity to anybody authorised to accept such reports relating to AML or any other law;

o. I/We certify that if we are signing under a power of attorney, the power of attorney has not been revoked; and

p. I/we have read and understood CIML's privacy collection statement in this Application Booklet and understand that a copy of the Privacy Policy is publicly available at www.channelcapital.com.au

q. I/we consent to my/our personal information being collected, held, used and disclosed in accordance with the Privacy Policy.

r. I/we consent to CIML disclosing this information to my/our financial adviser (named in this form). Where the financial adviser no longer acts on my/our behalf, I/we will notify CIML of the change.

s. If investing as a trustee, on behalf of a superannuation fund or trust, I/we confirm that I/we am/are acting in accordance with my/our powers and authority under the applicable trust deed. In the case of a superannuation fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993 (Cth);

t. I/We make an offer to become an investor in the Fund and that offer cannot be revoked but we acknowledge that CIML may accept or reject this Application Form in whole or in part; and

u. I/We am/are not a foreign person as defined Australian Foreign Acquisitions and Takeovers Act 1975 (Cth) and not a "foreign government investor" as defined in Foreign Acquisitions and Takeovers Regulation 2015 (Cth), unless disclosed in writing to CIML (including if the Investor is a resident of New Zealand).

v. I/We confirm that I/we are a wholesale client (as defined in section 761G of the Corporations Act) in Australia, or a wholesale investor within the meaning of the Financial Markets Conduct Act 2013 (NZ) in New Zealand

Investor Declaration

Name 1

Capacity

(i.e. Individual/Trustee/Director/Secretary/Partner/
Authorised Signatory)

Signature

Date

/ /

Name 2

Capacity

(i.e. Individual/Trustee/Director/Secretary/Partner/
Authorised Signatory)

Signature

Date

/ /

Wholesale or Professional Investor Certificate

If you are investing less than $500,000 you will need to get a "Qualified accountant" (defined below) to complete this form. Alternatively, submit an equivalent Qualified accountant's certificate to satisfy the trustee that you are a wholesale investor

This certificate is issued for the purposes of Section 708(8) and Section 761G of the Corporations Act 2001.

I hereby certify that the following person/persons has:

Please show the name of each person this applies to (print full legal name of the person – individual or company):

Individual(s)

1 | 2

3 | 4

Company

Net assets** of at least AUD $2.5 million; or

A gross income** for each of the last 2 financial years of at least AUD$250,000 a year

Controlled Companies or Trusts***

It is confirmed that for the purposes of the Corporations Act, that the above-named person/persons control the following companies or trusts:

Please list the name of the entities
(include details of trusts for which the entity acts as a trustee)

I confirm that I am a qualified accountant as defined in section 88B of the Corporations Act.

I belong to (name of the professional body)

I comply with this body's continuing professional education requirements.

Qualified Accountant* to sign (defined below):

Name | Signature

Date / /

* **"Qualified accountant"** means a member of a professional body that is approved by ASIC in writing for the purpose of the definition. ASIC has indicated that it will approve an member of:

(a) The Australian Society of Certified Practicing Accountants ("**ASPCA**"), who is entitled to use post-nominals "CPA" or "FCPA" and is subject to and complies with the ICAA's continuing professional development requirements;

(b) The Institute of Chartered Accountants in Australia (**"the ICAA"**), who is entitled to use the post-nominals of "CA", "ACA", or "FCA", and is subject to and complies with the ICAA's continuing professional education requirements; or

(c) The National Institute of Accountants (**"the NIA"**), who is entitled to use the post-nominals "MNIA" or "FNIA", and is subject to and complies with NIA's continuing professional education requirements.

** In calculating the net assets or gross income, the investor may include the net assets or gross income (as relevant) of any company or trust the investor controls (see Corporations Regulation 7.6.02AC).

*** Where the investor is a company or trust controlled by someone who has certificate from a qualified accountant, the investor may be considered wholesale (see Corporations Regulation 7.6.02AB).

PART F

Section A

Individuals/Joint Applicants

Minimum Identification Required
For each Investor please provide:

a) an original or certified copy of a valid Driver's Licence (Australian State or Territory, or Foreign Country equivalent) with photograph; or

b) an original or certified copy of a passport issued by Australian Commonwealth or expired passport which has not been cancelled and was current within the preceding two years; or

c) Passport or similar document issued for the purpose of international travel that contains a photograph and signature of the person and is issued by a foreign government, UN or UN Agency, with English translation provided by an accredited translator if not in English;

Or

d) Both:
(i) an original or certified copy of a valid primary I.D. document

☐ National Identity Card with a photograph and signature issued by Australian Commonwealth, State or Territory; or

☐ Foreign National Identity Card with a photograph and signature issued by a foreign government, UN or UN Agency, with English translation provided by an accredited translator, if not in English; or

☐ Birth Certificate or birth extract issued by Australian State or Territory; or

☐ Birth Certificate issued by foreign government, UN or UN Agency, with English translation provided by an accredited translator if not in English; or

☐ Citizenship Certificate issued by Commonwealth government; or

☐ Citizenship Certificate issued by foreign government, UN or UN Agency, with English translation provided by an accredited translator if not in English; or

☐ Pension card issued by Centrelink;

And
(ii) an original or certified copy of a valid secondary I.D. document:

☐ notice issued to an individual by Centrelink within preceding 12 months which records the provision of financial benefits to an individual and the individual's name and residential address; or

☐ notice of a foreign welfare department equivalent within preceding 12 months which records the provision of financial benefits to an individual and the individual's name and residential address; or

☐ notice issued to an individual by the ATO or relevant foreign Taxation authority within the preceding 12 months which records the name and residential address of the individual; or

☐ notice issued to an individual by a local government body or utilities provider within preceding three months which records the provision of services to that residential address or that individual; or

☐ For persons under 18, a notice issued by a school principal within the preceding three months containing the name of the person and his or her residential address and recording the period of time that the person attended the school.

Section B

Regulated Trust

Self-Managed Superannuation Fund, registered managed investment schemes, regulated trusts and Government Superannuation Fund copies of:

☐ a search of the relevant regulator e.g.: ASIC, ATO, APRA or Trust Deed

Section C
Private and Unlisted/ Unlicensed Public Australian Companies

Minimum Identification Required
Original or certified copies of:

- ☐ a search of the relevant ASIC database, or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); and
- ☐ where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied.
- ☐ for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.

Section D
Foreign Listed / Licensed Company (Australian Registered)

Australian Registered Foreign Company
Original or certified copies of:

- ☐ a search of the relevant ASIC database, search of the licence or other records of the relevant regulator, other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); and
- ☐ where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied.
- ☐ for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.

Section E
Listed / Licensed Australian Companies

Original or certified copies of:

- ☐ a search of the relevant ASIC database or relevant stock exchange or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report).

Section F
Foreign Private and Unlisted / Unlicensed Public Companies (Australian Registered)

Australian Registered Foreign Company
Original or certified copies of:

- ☐ a search of the relevant ASIC or other government database, a search of the relevant foreign stock exchange, a search of the licence or other records of the relevant regulator or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); or
- ☐ Certificate of Incorporation or recent extract of public company register or document issued by the foreign government (including a registration certificate).

Section G
Foreign Companies (not registered in Australia)

Unregistered Foreign Company
Original or certified copies of:

- ☐ Foreign registration certificate, Certificate of Incorporation, recent extract of company register; or
- ☐ other appropriate document(s), including a search of the relevant government database, a search of the relevant stock exchange, a search of the licence or other records of the relevant regulator, or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); and
- ☐ where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied.
- ☐ for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.

Section H
Other Trust Types

Original or certified copies of:

- ☐ the trust deed;
- ☐ if the Settler of the Trust has made a material asset contribution of >$10,000 and is still living, the identification requirements set out in Section 'A' must be satisfied; and
- ☐ where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied.

And
In respect of one of the trustees:

- ☐ if the trustee is an individual, then ID required as per the individual requirements as per Section 'A'; or
- ☐ if the trustee is a company, then ID required as per the company requirements as per Section 'C', 'D', 'E', 'F' or 'G'.

Section I
Deceased Estate

- ☐ Identification as per Section 'A' for trustee; and

Original or certified copies of:

- ☐ last Will and Testament of the deceased; and
- ☐ death certificate; or
- ☐ Grant of Probate.

Section J

Minor

Minimum Identification Required

☐ Identification as per Section 'A' for trustee; and

☐ Identification as per Section 'A' for minor.

CATEGORY OF ACCEPTABLE REFEREES

Certified Copy means a document that has been certified as a true copy of an original document by one of the following persons:

Schedule 1 - Persons before whom a statutory declaration may be made:

(a) a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described);

(b) a person who, under a law of the Commonwealth, a State or Territory, is currently licensed or registered to practice in Australia in an occupation listed in Part 1 of Schedule 1;

(c) a person who is listed in Part 2 of Schedule 1.

The Statutory Declaration Regulations 2023 are accessible through the following website: www.legislation.gov.au.

CC Wellington Multi-Sector Credit Fund

CLASS A UNITS

APIR: CHN7928AU

ADDITIONAL UNIT APPLICATION FORM

Channel Investment Management Limited ACN: 163 234 240 AFSL:439007

Please complete this form using BLACK INK and write clearly within the boxes in CAPITAL LETTERS.

If you require any information regarding your investments, please contact **Channel Client Services** on **1800 940 599**.

This additional unit application form is for existing Investors in the CC Wellington Multi-Sector Credit Fund (the 'Fund') who wish to apply for additional units in the Fund. The additional investment amount will be added to your existing investment in the Fund.

You should read the PDS to which this application relates issued by Channel Investment Management Limited ACN 163 234 240 AFSL 439007 before completing this additional unit application form.

Section 1. Investor Identification

Investor Reference Number

Full Name(s) of Registered Unitholder(s)

Registered Address

Suburb | State | Postcode

Section 2. Investment Amount

Additional Investment Amount: $

SOURCE OF FUNDS – Please tick the most relevant option.

☐ Retirement Savings ☐ Sale of Assets ☐ Financial Investments ☐ Employment Income ☐ Inheritance/Gift

☐ Business Activities ☐ Other (provide detail)

Section 3. Declaration and Authorisation

I/We have read and understood the PDS to which this application relates and the declarations conditions and acknowledgements contained under Part D 'Investor Declaration' of the Application Form and agree that they are incorporated in this declaration.

I/We agree, acknowledge and accept them and declare that all the details given in this application are true and correct.

I/We have received personally a complete and unaltered PDS prior to completing the Additional Unit Application Form. I/We certify that if we are signing under a power of attorney the power of attorney has not been revoked.

Investor 1

Date / /

Name

Capacity (i.e. Individual/Trustee/Director/Secretary/Partner/Authorised Signatory)

Investor 2

Date / /

Name

Capacity (i.e. Individual/Trustee/Director/Secretary/Partner/Authorised Signatory)

Section 4. Payment Details

BSB	Account Number	Account Name	Reference
082 124	320782603	CC Wellington Multi-Sector Credit Fund Applications Account	Please include your Investor Name in the reference field of your EFT.

Return form

Call:

If you have any questions in relation to this form, please call **Channel Client Services** on:

1800 940 599

Post to:

Apex Fund Services
Attn: Unit Registry
GPO Box 4968, Sydney NSW, 2001

Email to:
registry@apexgroup.com