

# SECURITIES TRANSFER FORM

**PART 1**

Marking Stamp

Full Name of Issuer of Securities			
Full Description of Securities			
Quantity		Figures	T.I.N for Stock Exchange Use Only
Sellers Full Names(s) Recorded Address	Shareholder reference number		FIN Number
	Given Names <span style="float: right;">Surname</span>		
SELLER(S) Transferor(s)  è	Date	Place	Stamp of Selling Agent  CRAIGS INVESTMENT PARTNERS LIMITED P O BOX 13155 TAURANGA NEW ZEALAND
SIGN HERE  Insert Date and Place of Signature	Date	Place	DATE AFFIXED
We hereby transfer the Securities described above to the person(s) named below transfers relating to the Securities described above			
<b>Part 11 PARTICULARS OF BUYER</b>			
Consideration	Words		Figure\$
BUYER(S) Full Names of Transferee			Stamp of Buying Agent
Full Postal Address			
I/We confirm that the Securities described above have been purchased in an authorised transaction (as defined in the Securities Transfer Act 1977) and I/We request that such entires be made in the registrar as are necessary to give effect to this transfer.			DATE AFFIXED