

All correspondence and enquiries to:

ADVANCED SHARE REGISTRY

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SCHEME OF ARRANGEMENT PAYMENT BY TELEGRAPHIC TRANSFER FACILITY

PLEASE COMPLETE THIS FORM IN BLACK INK USING CAPITAL LETTERS.

A TELEGRAPHIC TRANSFER FACILITY

I/We hereby request that the payment of the Scheme Consideration in cash in respect of my/our shareholding in Dragontail Systems Limited are to be redirected into the following bank / building society account by Telegraphic Transfer:

BANK DETAILS

SWIFT/BIC CODE

BANK NAME

BANK ADDRESS

PAYEE DETAILS (Note: The name(s) must be the same as that/those printed above. Distributions cannot be credited to third party accounts).

ACCOUNT HOLDER NAME

ACCOUNT NUMBER

CURRENCY

INTERMEDIARY BANK DETAILS (IF APPLICABLE)

SWIFT/BIC CODE

BANK NAME

BANK ADDRESS

Shareholder's Contact Name**Telephone Number****Email****B SIGN HERE – This section must be signed for your instructions to be executed**

Securityholder 1 (Individual)

Joint Securityholder 2 (Individual)

Joint Securityholder 3 (Individual)

Sole Director and Sole Company Secretary/
Director (delete one)

Director/Company Secretary (delete one)

Date

Signing Instructions

Individual:

This form is to be signed by the securityholder.

Joint Holding:

Where the holding is in more than one name, all of the securityholders must sign.

Power of Attorney:

To sign as Power of Attorney, you must have already lodged it with the registry. Alternatively, attach a certified photocopy of the Power of Attorney to this form.

Companies:

Director, Company Secretary, Sole Director and Sole Company Secretary can sign. Please indicate the office held by signing in the appropriate space.