ASM Advisor Declaration

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| Full name of ASM Advisor |  |
| Full name of Applicant or ASM Company,  as applicable |  |
| Details of the securities to which this declaration applies (e.g. company name, 1,000,000 Ordinary Shares of 5c each), including the date on which admission is sought (if applicable): | |
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|  | , an officer of the above ASM Advisor, |
| duly authorised to give this declaration, hereby confirms on behalf of that ASM Advisor that: | |
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| Section A | |
| to the best of its knowledge and belief, having made due and careful enquiry and considered all relevant matters under the ASM Rules for Companies and Rules for ASM Advisors in relation to this application for admission, all applicable requirements of the ASM Rules for Companies and  the Rules for ASM Advisors have been complied with and, in particular, (i) the conditions for admission in rules 7 and 8 of the **ASM Rules for Companies** have been satisfied (ii) the admission document complies with Schedule Two of the current ASM Rules for Companies, or (iii) (in the case of a quoted Applicant only) the requirements of Schedule One and its supplement have  been complied with; and | |

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| Section B | | |
| (a) it is satisfied that the **Applicant** and its securities are appropriate to be admitted to **ASM**, having made due and careful enquiry and considered all relevant matters set out in the **ASM Rules for Companies** and **Rules for ASM Advisors**; and  (b) the directors of the **Applicant** have received advice and guidance (from this **ASM Advisor** and other appropriate professional advisors) as to the **Applicant’s responsibilities** and obligations under the **ASM Rules for Companies** in order to facilitate due compliance by the **Applicant** on an ongoing basis; and  (c) it will comply with the **ASM Rules for Companies** and **Rules for ASM Advisors** as applicable to it in its role as **ASM Advisor** to this **Applicant**. | | |
| Note:   * Sections A and B must be completed where securities are being admitted to **ASM** pursuant to an **admission document**. * Only Section B must be completed where this form is being completed pursuant to a change of **ASM Advisor** and  Section A will not be applicable. In such cases, the term ‘**Applicant**’ should be deemed to read ‘**ASM Company**’. * Terms used in this **ASM Advisor’s declaration** are as defined in the **ASM Rules for Companies**. | | |
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| Name of ASM Advisor |  | |
|  | |  |
| Signature | | Date |
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| Administration details | | |
| |  |  | | --- | --- | | Name(s) of contact(s) at ASM Advisor regarding the application |  | |  |  | | | |
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