

INVESTOR SALE FORM – MLI PERFORMANCE AUTOCALL (MLI 2015 - 07) OFFER

This Investor Sale Form is to be used for requesting Early Maturity in relation to Units in the MLI identified in this Investor Sale Form. Capitalised terms in the Investor Sale Form will have the same meaning as given to them in the PDS (unless otherwise defined in this Investor Sale Form). In accordance with clause 4.2 of the terms and conditions of the MLI, it is in the Issuer's absolute discretion to accept or reject the request for Early Maturity.

PLEASE RETURN THIS INVESTOR SALE FORM TO YOUR STOCKBROKER OR FINANCIAL ADVISER, OR ALTERNATIVELY SEND TO:

**Structured Products Support
MLI Performance Autocall (MLI 2015 - 07) Offer
Citigroup Global Markets Australia Pty Limited
GPO Box 557 Sydney NSW 2001**

I/We hereby apply for Early Maturity in respect of the following Units issued by Citi pursuant to the MLI Performance Autocall (MLI 2015 - 07) Product Disclosure Statement dated 27 April 2015.

A NAME AND ADDRESS OF INVESTOR (TO BE COMPLETED BY ALL INVESTORS) (PLEASE PRINT OR TYPE)

Holder Reference Number (as it appears on your holding statement)

Investor 1 Details (Individual, Joint, Trust, Company and Superannuation Applicants)

Name	Date of Birth
<input type="text"/>	<input type="text" value="DDMMYY"/>

Address or registered office

Account name (if applicable)

Investor 2 Details (Individual, Joint, Trust, Company and Superannuation Applicants)

Name	Date of Birth
<input type="text"/>	<input type="text" value="DDMMYY"/>

Address or registered office

Account name (if applicable)

B CONTACT DETAILS (PLEASE PRINT OR TYPE)

Name of Contact

Daytime Telephone	After Hours Phone	Mobile number
<input type="text" value="()"/>	<input type="text" value="()"/>	<input type="text"/>

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Email address

C DETAILS OF THE UNITS IN RELATION TO WHICH EARLY MATURITY IS REQUESTED

Example: Series	Number of Units (must equal your total holding of Units)
AUD	100,000

Series	Number of Units (must equal your total holding of Units)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

D INVESTOR'S SIGNATURE (TO BE COMPLETED BY ALL INVESTORS)

PLEASE READ THE PDS AND TERMS CAREFULLY BEFORE SIGNING THIS INVESTOR SALE FORM

Please sign this Investor Sale Form below in the appropriate space provided. If this Investor Sale Form has been signed by an attorney on behalf of an Investor, each attorney executing the Investor Sale Form states that he, she or it has no notice of revocation or suspension of the power of attorney under which the attorney executes this Investor Sale Form.

If the Investor is a person:

Signature **Investor 1**

<input checked="" type="checkbox"/>	SIGN HERE	Date / /
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Title and Full Name

Signature **Investor 2** (if applicable)

<input checked="" type="checkbox"/>	SIGN HERE	Date / /
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Title and Full Name

OR, if the Investor is a Company:

Please insert your ABN/ACN in the space provided and sign by two directors or one director and one secretary or sign by authorised attorney(s).

ABN/ACN

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Signature of **secretary/director or authorised attorney**

<input checked="" type="checkbox"/>	SIGN HERE	Date / /
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Title and Full Name

Signature of **director or authorised attorney**

<input checked="" type="checkbox"/>	SIGN HERE	Date / /
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Title and Full Name
