

DIVIDEND REINVESTMENT PLAN PARTICIPATION NOTICE

DO NOT COMPLETE THIS FORM IF YOU WISH TO RECEIVE CASH DIVIDENDS.

Name and Address

Registered Holder(s)	
	This Notice should be returned to Barramundi's share registrar at:
	Barramundi Limited Share Registrar
	Computershare Investor Services Limited
Description of Shares	Level 2, 159 Hurstmere Road
	Takapuna
	Drivinto Dog 02110

Holder No.

Shares Held

A Dividend Reinvestment Plan operates for your Barramundi Shares. If you wish to receive all or part of your dividend in Barramundi Shares, simply complete and return this form to the share registrar at the address shown.

Information about the Dividend Reinvestment Plan is set out in the current Offer Document for the Plan. Capitalised terms in this Notice have the meaning given to them in the Offer Document. Complete the appropriate box if you wish to participate in the Plan for all, or for some, of your Barramundi Shares. Tick the first box if Full Participation is required. If Partial Participation is required, either state the number of Barramundi Shares you wish to participate in the second box, or the percentage of your shareholding (shares) that you wish to participate in the third box.

Full Participation (please tick)		Partial Participation (number of shares)		Partial Participation (percentage of shares)	
	Or		Or		

Joint holders must each sign. Companies must execute by an authorised officer or attorney. If signed by an attorney, a nonrevocation declaration must accompany this Notice and the relevant authority must either have been exhibited previously to Barramundi or must accompany this Notice.

Barramundi may suspend, vary or terminate your participation, subject to the Terms and Conditions of the Plan set out in the Offer Document

I / We acknowledge receipt of a copy of the Offer Document. I / We agree to be bound by the Terms and Conditions of the Plan set out in the Offer Document dated January 2020.

I / We hereby direct that my / our entitlement to cash dividends in respect of my / our Shares be applied toward the purchase of Additional Shares in accordance with the Plan.

Signature of Shareholder(s)

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		/	/	
		/	/	
		/	/	

Date

Private Bag 92119 AUCKLAND 1142

Refer to the Offer Document for details of when your participation will commence. It will depend on when this Notice is received by Barramundi's share registrar.

Certificate of Non-Revocation of Power of Attorney

I,			
	(Name of Attorney)		
of			
	(Address and Occupation of Attorney)		
Hereby Certify:			
1. That by a Power of Attorney dated the			

	day of	20
Name		
Address		
Occupation		

(of person for whom Attorney is signing)

"the Donor" appointed me his / her / its Attorney on the terms and conditions set out in the Power of Attorney.

- 2. That I have executed this Notice as Attorney under that Power of Attorney and pursuant to the powers thereby conferred upon me.
- 3. That at the date of this certificate I have not received any notice or information of the revocation of that Power of Attorney by the death (or winding up) of the Donor or otherwise.

Signed at

this	day of	20	
Signature of Attorney			