

ADX Energy Ltd 29 Bay Road Claremont WA 6010 Australia

Phone: +61 8 9381 4622

Name and address:		
Application Form on Exercis	e of Listed Options Expiring 11 Jar	nuary 2025
To the Directors, ADX Energy Ltd		<b>,</b> =
I/We hereby exercise	option(s) and pay ADX Energy Ltd A	\$
being A\$0.14 per share on application for	ordinary share:	s in the capital of the Company.
I/We request that you allot me that number o Company, and I/we authorise you to place m	f shares and I/we agree to accept that number of shar y/our name on the register.	es on the terms below and the Constitution of the
My/Our SRN/HIN (as shown on my/our Issue holdings statement) is	er Sponsored holding statement or CHESS	
Sign Here – This section <u>must</u> be	signed for your instructions to be execut	ed
We authorise you to act in accordance with	my/our instructions set out above.	
ndividual or Securityholder 1	Securityholder 2	Securityholder 3
Director	Director/Company Secretary	Sole Director and Sole Company Secretary
	the attorney states that they have not received a or Services Pty Limited needs to sight a certified	
Contact Name	<b>Contact Telephone Number</b>	Day/Date Month Year
		1 1
Email Address		

## **Lodgement of Notice**

This Exercise of Options Notice must be received at the address below by no later than 5.00pm (AWST) on Saturday 11 January 2025.

Payments must be remitted directly to the Company's bank account:

Bank: Commonwealth Bank of Australia Account Name: ADX Energy Ltd

BSB: 066 130 Account 10425629 Branch: West Perth WA SWIFT Code CTBAAU2S

Please include your SRN/HIN as a reference.

Please email a copy of your completed option exercise form to Admin@adxenergy.com.au once payment has been made. ADX Energy Ltd accepts no responsibility if this Options Notice is lodged at any other address or by any other means.