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**Form 603****Corporations Act 2001  
Section 671B****Notice of initial substantial holder**

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To Company Name/Scheme GOLDFIELDS MONEY LIMITED (GMY)ACN/ARSN 087 651 849**1. Details of substantial holder (1)**Name FINANCIAL PROJECT OF AUSTRALIA LIMITED (FPA)ACN (if applicable) 603 516 543The holder became a substantial holder on 02 / 12 / 15**2. Details of voting power**

The total number of votes attached to all the voting shares in the company or voting interests in the scheme that the substantial holder or an associate (2) had a relevant interest (3) in on the date the substantial holder became a substantial holder are as follows:

Class of securities(4)	Number of securities	Persons' votes(5)	Voting power (6)
Ordinary shares	2,350,010	2,350,010	15.0%

**3. Details of relevant interests**

The nature of the relevant interest the substantial holder or an associate had in the following voting securities on the date the substantial holder became a substantial holder are as follows:

Holder of relevant interest	Nature of relevant interest (7)	Class and number of securities
FPA	Direct holder of shares following off-market transfer transaction (see transfer form attached)	2,350,010 ordinary shares

**4. Details of present registered holders**

The persons registered as holders of the securities referred to in paragraph 3 above are as follows:

Holder of relevant interest	Registered holder of securities	Person entitled to be registered as holder (8)	Class and number of securities
FPA	FPA	FPA	2,350,010 ordinary shares

**5. Consideration**

The consideration paid for each relevant interest referred to in paragraph 3 above, and acquired in the 4 months prior to the day that the substantial holder became a substantial holder is as follows:

Holder of relevant interest	Date of acquisition	Consideration (9)		Class and number of securities
		Cash	Non-cash	
FPA	02/12/15	Off market purchase at \$1.18 per share, total consideration \$2,773,011.80		2,350,010 ordinary shares

#### 6. Associates

The reasons the persons named in paragraph 3 above are associates of the substantial holder are as follows:

Name and ACN/ARSN (if applicable)	Nature of association
N/A	

#### 7. Addresses

The addresses of persons named in this form are as follows:

Name	Address
FPA	1002/68 Alfred Street South, Milsons Point NSW 2061

#### Signature

print name Howard Ting

capacity Director

sign here



date 3 / 12 / 15

### Directions

1. If there are a number of substantial holders with similar or related relevant interests (eg. a corporation and its related corporations, or the manager and trustee of an equity trust), the names could be included in an annexure to the form. If the relevant interests of a group of persons are essentially similar, they may be referred to throughout the form as a specifically named group if the membership of each group, with the names and addresses of members is clearly set out in paragraph 7 of the form.
2. See the definition of "associate" in section 9 of the Corporations Act 2001.
3. See the definition of "relevant interest" in sections 608 and 671B(7) of the Corporations Act 2001.
4. The voting shares of a company constitute one class unless divided into separate classes.
5. The total number of votes attached to all the voting shares in the company or voting interests in the scheme (if any) that the person or an associate has a relevant interest in.
6. The person's votes divided by the total votes in the body corporate or scheme multiplied by 100.
7. Include details of:
  - (a) any relevant agreement or other circumstances by which the relevant interest was acquired. If subsection 671B(4) applies, a copy of any document setting out the terms of any relevant agreement, and statement by the person giving

full and accurate details of any contract, scheme or arrangement, must accompany this form, together with a written statement certifying this contract, scheme or arrangement; and

- (b) any qualification of the power of a person to exercise, control the exercise of, or influence the exercise of, the voting powers or disposal of the securities to which the relevant interest relates (indicating clearly the particular securities to which the qualification applies).

See the definition of "relevant agreement" in section 9 of the Corporations Act 2001.

- 8. If the substantial holder is unable to determine the identity of the person (eg. if the relevant interest arises because of an option) write "unknown".
- 9. Details of the consideration must include any and all benefit, money and other, that any person from whom a relevant interest was acquired has, or may, become entitled to receive in relation to that acquisition. Details must be included even if the benefit is conditional on the happening or not of a contingency. Details must be included of any benefit paid on behalf of the substantial holder or its associate in relation to the acquisitions, even if they are not paid directly to the person from whom the relevant interest was acquired.

## STANDARD TRANSFER FORM FOR NON-MARKET TRANSACTIONS

PLEASE NOTE: \$54.00 per transfer (GST Incl)

1. Full name of security / stock	GOLDFIELDS MONEY LIMITED		
2. Full Description of Securities	CLASS: ORDINARY	If not fully paid, paid to:	
3. Quantity	WORDS: ONE MILLION AND EIGHTY THOUSAND	FIGURES: 1 080 000	
4. Full Name(s) of Seller(s) [Transferor(s)]	Surname(s) / Company Name: ROCKET SCIENCE PTY LTD Mr/Mrs/Miss: Given Name(s): A/C Designation (if required) < THE TROJAN CAPITAL FUND A/C > PLEASE USE BLOCK LETTERS		
5. Full Postal Address of Seller(s) [Transferor(s)]	GPO Box 1550 BRISBANE State QLD Postcode 4001		
6. PID	7. SRN <input type="checkbox"/> or HIN <input checked="" type="checkbox"/> (please tick) Number:	8. Trading A/C	
If this is a transfer of issuer sponsored holdings, have you completed section 1 or section 2, as appropriate, of the AML requirements <input type="checkbox"/> (please tick)			
9. Contact Details (Seller)	Work number	Mobile number	
10. Consideration	\$A 1 274 400.00		
11. Date of Purchase	2/12/2015		
12. Full Name(s) of Buyer(s) [Transferee(s)]	Surname(s) / Company Name: FINANCIAL PROJECT OF AUSTRALIA LIMITED Mr/Mrs/Miss: Given Name(s): A/C Designation (if required) < PLEASE USE BLOCK LETTERS		
13. Full Postal Address of Buyer(s) [Transferee(s)]	1002/68 ALFRED STREET SOUTH MILSONS POINT State NSW Postcode 2061		
14. PID	15. SRN <input type="checkbox"/> or HIN <input checked="" type="checkbox"/> (please tick) Number:	16. Trading A/C	
17. Contact Details (Buyer)	Work number	Mobile number	
I/We the registered holder(s) and undersigned Seller(s) for the above consideration do hereby transfer to the above name(s) hereinafter called the Buyer(s) the securities as specified above appearing in my/our name(s) in the books of the above named Company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/we the Buyer(s) do hereby agree to accept the said securities to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed.			
18. Seller(s) [Transferor(s)] Sign Here	Company Use Only <input checked="" type="checkbox"/> Sole Director <input type="checkbox"/> Director/Secretary <input type="checkbox"/> Director/Secretary PLEASE TICK Company Seal		
19. Date Signed (Seller)	2/12/2015		
20. Buyer(s) [Transferee(s)] Sign Here	<input type="checkbox"/> Sole Director <input checked="" type="checkbox"/> Director/Secretary <input type="checkbox"/> Director/Secretary PLEASE TICK		
21. Date Signed (Buyer)	2/12/2015		
Any alterations made to this form MUST be initialed by both the Buyer(s) and the Seller(s). The use of correction fluid or tape renders the form invalid. Any increase to the amount of securities being transferred is not acceptable, even if initialed.			
Your payment options are • Direct Debit from the bank account nominated on your Trading A/C OR • Cheque (to be attached to form)			

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2. Full Description of Securities	CLASS: ORDINARY	If not fully paid, paid to:	
3. Quantity	WORDS: ONE MILLION TWO HUNDRED AND SEVENTY THOUSAND AND TEN	FIGURES: 1 270 010	
4. Full Name(s) of Seller(s) [Transferor(s)]	Surname(s) / Company Name: JH NOMINEES AUSTRALIA PTY LTD. Mr/Mrs/Miss: Given Name(s): A/C Designation (if required) < HARRY FAMILY SUPER FUND A/C > PLEASE USE BLOCK LETTERS		
5. Full Postal Address of Seller(s) [Transferor(s)]	GPO Box 1550 BRISBANE State QLD Postcode 4001		
6. PID	7. SRN <input type="checkbox"/> or HIN <input checked="" type="checkbox"/> (please tick) Number:	8. Trading A/C	
If this is a transfer of issuer sponsored holdings, have you completed section 1 or section 2, as appropriate, of the AML requirements <input type="checkbox"/> (please tick)			
9. Contact Details (Seller)	Work number	Mobile number	
10. Consideration	\$A 1 498 611 - 80		
11. Date of Purchase	2 / 12 / 2015		
12. Full Name(s) of Buyer(s) [Transferee(s)]	Surname(s) / Company Name: FINANCIAL PROTECT OF AUSTRALIA Mr/Mrs/Miss: Given Name(s): LIMITED A/C Designation (if required) < PLEASE USE BLOCK LETTERS >		
13. Full Postal Address of Buyer(s) [Transferee(s)]	1002 / 68 ALFRED STREET SOUTH MILSONS POINT State NSW Postcode 2061		
14. PID	15. SRN <input type="checkbox"/> or HIN <input checked="" type="checkbox"/> (please tick) Number:	16. Trading A/C	
17. Contact Details (Buyer)	Work number	Mobile number	
I/We the registered holder(s) and undersigned Seller(s) for the above consideration do hereby transfer to the above name(s) hereinafter called the Buyer(s) the securities as specified above standing in my/our name(s) in the books of the above named Company, subject to the several conditions on which I/we hold the same at the time of signing hereof and I/we the Buyer(s) do hereby agree to accept the said securities to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed.			
18. Seller(s) [Transferor(s)] Sign Here →	Company Use Only <input type="checkbox"/> Sole Director <input checked="" type="checkbox"/> Director/Secretary <input checked="" type="checkbox"/> Director/Secretary PLEASE TICK		Company Seal
19. Date Signed (Seller)	2 / 12 / 2015		
20. Buyer(s) [Transferee(s)] Sign Here →	<input type="checkbox"/> Sole Director <input checked="" type="checkbox"/> Director/Secretary <input checked="" type="checkbox"/> Director/Secretary PLEASE TICK		
21. Date Signed (Buyer)	2 / 12 / 2015		
Any alterations made to this form MUST be initialled by both the Buyer(s) and the Seller(s). The use of correction fluid or tape renders the form invalid. Any increase to the amount of securities being transferred is not acceptable, even if initialled.			
Your payment options are • Direct Debit from the bank account nominated on your Trading A/C OR • Cheque (to be attached to form)			