

NOTICE OF EXERCISE OF OPTIONS

Please complete below using block letters.

To: The Company Secretary
Firefinch Limited (**Company**)
Level 3
31 Ventnor Avenue
West Perth WA 6005
Email: cosec@firefinchltd.com

I / We.....
Name of Option holder/s (Please use block letters)

.....
Registered address of Option holder/s (Please use block letters)

hereby exercise all of my/our options.....
(Describe options number, expiry and exercise price) to apply for

.....
(number in words) (in figures)

fully paid ordinary shares in the capital of the Company (**Shares**).

PAYMENT

Please mark the appropriate box below

I/we:
 on or before the date of this notice, have or will deposit \$.....in cleared funds into the bank account of the Company specified below, in payment of such Shares at \$0.15 per option being exercised:

Bank Account details
Account name Firefinch Limited
Bank Westpac Banking Corporation
BSB 036-051
Account Number 517426

enclose my/our cheque for \$..... in payment of such Shares at \$0.15 per option being exercised.

I/we request that you allot me/us on the Share register the number of Shares to which I am/we are entitled on the basis calculated above, and I/we agree to accept such shares subject to the Company's Constitution.

YOUR DETAILS

Holder Identification Number (HIN)
Securityholder Reference Number (SRN):.....
Telephone Number:(...):.....
Contact Name (PRINT):.....

PLEASE SIGN HERE:

Option holder 1 (Individual) Joint Option holder 2 (Individual) Joint Option holder 3 (Individual)

Sole Director & Sole Company Secretary Director Director / Company Secretary

Date: _____

Please enter the signature(s) of registered option holder(s).

- a) Individual or Joint Option holders – each joint Option holder must sign.
- b) Attorneys – if this notice is signed by an attorney, the attorney declares they have no notice of revocation of the power under which this notice is signed.
- c) Companies – must execute this notice in accordance with Section 127 of the *Corporations Act 2001* (Cth).