GLOBAL HEALTH

Connecting Clinicians and Consumers

GLOBAL HEALTH LIMITED
ABN 75 091 377 892

NOTICE OF EXERCISE OF OPTIONS

Global Health Limited

ABN 75 091 377 892
(**the Company**)

Optionholder Name: _____

Optionholder ACN (if a company): _____

Optionholder Address: _____

I, being the registered holder of options in the capital of the Company hereby exercise: _____ options to subscribe for ordinary shares and enclose application monies payable of: _____ per option exercised.

I authorise you to register me as the holder of the shares to be allotted to me and agree to accept such shares subject to the constitution of the Company.

Signed: _____ _____

Shareholder 1 (if an individual) OR Director (if optionholder is a company)	Shareholder 2 (if a joint holder) OR Director / Company Secretary

If the optionholder is a company, this Notice should be signed in accordance with the company's constitution and the Corporations Act 2001 (Cth). If the options are held jointly, all joint holders must sign. Notices which are not completed correctly may be rejected.

Dated: _____

Please make payment to Global Health Limited. If paying by electronic funds transfer, please pay to:

Bank:- ANZ
BSB:- 013 017
Account name: Global Health Limited
Account number:- 3985 89299

If paying by cheque, bank draft or money order, please send your payment by post with your completed and Notice of Exercise of Options to the address shown below.

Please return your completed Notice of Exercise of Options by email to: Sam.Butcher@global-health.com or by post to:

Global Health Limited
Level 2, 696 Bourke Street,
Melbourne, Victoria 3000