

Share Purchase Plan - Application Form

ABN 35 003 255 221

Name & Address Name & Address

Record date:	7.00pm (AEST) on 24 July 2014
Offer opens	30 July 2014
Offer closes*	5.00pm (AEST)15 August 2014
Allotment Date*	22 August 2014

^{*} The Company reserves the right to vary these dates by making an announcement to the ASX.

Α	Offer Choice			
Indi	cate your choice below by marking	one box only		
	Offer A \$15,000.00 10,000 Shares	Offer B A\$10,500.00 7,000 Shares	Offer C A\$7,500.00 5,000 Shares	Offer D A\$4,500.00 3,000 Shares
	e that in the event of over-subsecretion undertake a scale-back o	cription above the maximum A\$on an equitable basis.	1.5 million Offer Amount, the I	Board will in its
В	Payment Details			
Reg	ment may only be made by BPA\ istry. ments cannot be made at any bank	Y or cheque. Cash will not be acc	epted via the mail or at the Sor	nnoMed Limited Share
D	evment Ontion 1 - RPAV			



Biller Code: 119040

Ref:

Telephone & Internet Banking - BPAY®

Contact your bank, credit union or building society to make this payment from your cheque or savings account.

More info: www.bpay.com.au

® Registered to BPAY Ltd ABN 69 079 137 518

- To pay via BPAY please contact your participating financial institution
- If paying by BPAY you do not need to return the Application Form
- If paying by BPAY the amount of your payment received in the account divided by the issue price will be deemed to be the total number of shares you are applying for. For your application to be valid you can only make payment for one of the amounts specified above in section A.

Payment Option 2 - Cheque

Record cheque details below

Drawer	Cheque Number	BSB Number	Account No.	Amount A\$

- Only cheques or bank drafts in Australian dollars and drawn on a bank or financial institution in Australia will be accepted.
- Your cheque or bank draft must be made payable to SomnoMed Limited and crossed Not Negotiable.
- Please ensure that you submit the correct amount. Incorrect payments may result in your application being rejected.

C Contact Details

Please provide a telephone number and contact name in case we need to contact you regarding your application.

Home telephone number	Work telephone number	Contact name

D Declarations and Acknowledgments

By lodging this form with your cheque or by making a BPAY payment you acknowledge and confirm that you have read, understood and agreed to the terms and conditions of the SomnoMed Limited Share Purchase Plan (SPP), details of which are contained in the SPP Booklet dated 30 July 2014. SomnoMed Limited may settle in any manner it deems appropriate, any dispute or anomalies which may arise in connection with or by reason of the operation of the SPP, whether generally or in relation to any applicant or application of shares. The decision of SomnoMed Limited will be conclusive and binding on all persons to whom the determination relates. SomnoMed Limited reserves the right to waive compliance with any provision of the SPP terms and conditions. The Directors reserve the right to withdraw the offer of shares under the SPP, or reduce the amount of shares that may be subscribed for under the SPP in any manner, at any time prior to allotment. Any excess application moneys will be refunded. No interest will be paid on any refunded application money.

NO SIGNATURE IS REQUIRED ON THIS FORM

THIS OFFER IS NON-RENOUNCEABLE

Completed Application Forms and payment must be received no later than 5.00 pm (AEST) on 15 August 2014 at:

MAILING ADDRESS Boardroom Pty Limited GPO Box 3993 SYDNEY NSW 2001 DELIVERY ADDRESS Boardroom Pty Limited Level 7 207 Kent Street SYDNEY NSW 2000

You should allow sufficient time for this to occur. The postal acceptance rule does not apply to the SPP.