

Switching Investment Options Form

Please complete the form in **BLOCK LETTERS** and mark appropriate boxes with an **X**. Return to us at the above address.

1. Account Details

Existing Account Name

Existing Managed Account Number

2. Switching FROM

Current Investment Option	Amount to Transfer	In Full
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>

3. Switching TO

New Investment Option	Amount to Transfer	In Full
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>

4. Declaration and Signing

To: Investment Administration Services Pty Ltd (IAS):

I/We declare that:

- All details provided by me/us in this form are true and correct and I/we authorise IAS to give effect to my/our new Investment Options requirements.
- Where I/we are signing under Power of Attorney, I/we verify that, at the time of signing I/we had not received notice of revocation of that Power of Attorney. A certified copy of the Power of Attorney has been enclosed with this form (if not previously provided).

Individual/joint account holder/trustee(s) sign here

If the account is in joint names, all account holders must sign. If there are more than two trustees attach additional signatures.

Signature Investor 1 or Company Director/
Sole Director/Power of Attorney

Signature Investor 2 or Company Director/
Company Secretary/Power of Attorney

X

X

Date

/ /
D D M M Y Y Y Y

Date

/ /
D D M M Y Y Y Y