

Superannuation Savings Account Direct Debit Authority (Regular Savings Plan) form

Issued by Commonwealth Bank of Australia ABN 48 123 123 124 AFSL 234945 (Commonwealth Bank) the retirement savings account provider for the Commonwealth Bank Superannuation Savings Account (Superannuation Savings Account) which is administered by The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809 AFSL 235035 (CMLA). Commonwealth Financial Services is a registered business name of CMLA.

| , | $\overline{}$ | $\overline{}$ |
|---|---------------|---------------|
| / | | · / |
| 1 | | 1 1 |
| (| ш | |
| 1 | ш | _ / |

You may lodge this form at any Commonwealth Bank Branch or post to:

Commonwealth Bank Superannuation Savings Account Reply Paid 3306 Sydney NSW 2001

We will make changes effective the date we receive your completed documentation at our principal office of administration.

Please ensure you retain the Direct Debit Request Service Agreement for your records.

| ccount number | Date of birth |
|---|----------------------|
| ithe Civer needs (s) | DD/MM/YYY |
| itle Given name(s) Surname | |
| desidential address | |
| | |
| State | Postcode |
| ostal address (if applicable) | |
| | |
| State | Postcode |
| aytime phone number Evening phone number Mobile phone number | |
| | |
| mail address | |
| | |
| | |
| ection 2 – Commencement of/change in Regular Savings Plan | |
| . Please change my contribution frequency (tick correct box): | |
| Cancel my Regular Savings Plan (direct debit will be cancelled) | |
| Commence a Regular Savings Plan (please complete section 4) | |
| Change bank account for my Regular Savings Plan (please complete section 4) | |
| Change my regular contribution amount, the amount to debit each month is | per month (min \$10) |
| . Please allocate regular contributions as follows: Personal | \$ |
| Spouse | \$ |
| Total amount | \$ \$ |
| Note: | |

004-037 300615 Page 1 of 4

I am aged 65-74, and in the financial year ending **30 June 20** , I have worked in paid employment for at least 40 hours in a period of not more than 30 consecutive days for the purposes of personal contributions (non-concessional), spouse

contributions (can only be made until age 70) and voluntary employer contributions including salary sacrifice.

| Section 4 - Details of the account to debit (all details must be supplied) | |
|---|----|
| I authorise the Commonwealth Bank of Australia (APCA User ID Number 65303), until further notice in writing, to arrange to debit funds from my account at the financial institution identified as described in the schedule below, any amounts which they may debit or charge me through the Direct Debit System. | |
| Name of the financial institution and branch where your account is held | |
| | |
| Address of the above financial institution | |
| | |
| State Postcode | |
| Account name (please write in full) | |
| | |
| BSB Account number | |
| | |
| Please commence debiting this account on the of each month. | |
| | |
| Section 5 – Declaration | |
| I/We; | |
| authorise the debit user to verify the details of the above mentioned account with my/our financial institution; authorise that the financial institution may release information allowing the debit user to verify the above mentioned account details; an | ıd |
| have read the Direct Debit Request (DDR) Service Agreement provided overleaf and agree with its terms and conditions. | _ |
| Signed by the customer/s (if joint account all signatures may be required) | |
| Print name | |
| | |
| Signature of Bank account holder Date | |
| DD/MM/YYYY | |
| | |
| Print name | |
| | |
| Signature of Bank account holder Date | |
| DD/MM/YYYY | |
| | |
| Bank use only | |
| Please ensure this notification form is fully completed and send original to: | |
| 2052-011, Commonwealth Financial Services | |
| Date received | |
| DD/MM/YYYY | |
| Branch name | |
| | |
| Contact name | |
| Contact number | |
| Contact number | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

004-037 300615 Page 2 of 4



Superannuation Savings Account Direct Debit Authority (Regular Savings Plan) form

Issued by Commonwealth Bank of Australia ABN 48 123 123 124 AFSL 234945 (Commonwealth Bank) the retirement savings account provider for the Commonwealth Bank Superannuation Savings Account (Superannuation Savings Account) which is administered by The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809 AFSL 235035 (CMLA). Commonwealth Financial Services is a registered business name of CMLA.



Please ensure you retain this page for your records.

Important notices

Definitions for this agreement

Account: the account nominated by you on the direct debit request.

Agreement: this Direct Debit Request Service Agreement between you and us, including the direct debit request.

Business day: a day other than a Saturday or a Sunday or a listed public holiday in Sydney.

Debit day: the day that payment is due.

Debit payment: a particular transaction where a debit is made, according to your direct debit request.

Direct debit request: the direct debit request between us and you.

Us, we or our: The Commonwealth Bank of Australia ABN 48 123 123 124, the company you have authorised to debit your account.

You and your: the customer/s who signed the direct debit request.

Your financial institution: the financial institution where you hold the account that you have authorised us to arrange to debit.

1. Debiting your account

- 1.1 By signing a direct debit request, you authorise us to arrange for funds to be debited from your account according to the arrangement agreed upon within your application.
- 1.2 We will only arrange for funds to be debited from your account:
 - as authorised in the direct debit request; and/or
 - according to any notice sent to you by Commonwealth Bank of Australia, specifying the amount payable for a product and the date the payment is due.
- 1.3 If the debit day falls on a day that is not a business day, we may direct your financial institution to debit your account on the following business day. If you are unsure about which day your account has or will be debited, please check with your financial institution.

2. Changes by us

2.1 We may vary this agreement at any time by giving you at least 10 business days notice.

3. Changes by you

- 3.1 If you wish to change any of your direct debit arrangements, simply call 13 2015 between 8.30 am and 6 pm (Sydney time), Monday to Friday, however, any changes you wish to make will not be implemented until we have received confirmation of those changes from you in writing.
- 3.2 If you wish to stop or defer a debit payment, you must write to us at least 10 business days before the next debit day. This notice should be given to us before you give notice to your financial institution.
- 3.3 You may also cancel your authority for us to debit your account at any time by giving us 10 business days notice in writing before the next debit day. This notice should be given to us in the first instance and should be sent to:

Commonwealth Bank Superannuation Savings Account

Reply Paid 3306

Sydney NSW 2001

4. Your obligations

- 4.1 It is your responsibility to ensure that there are sufficient clear funds available in your account, or make the necessary arrangements with your financial institution, to allow a debit payment to be made.
- 4.2 If there are insufficient clear funds available in your account, or you have failed to make the necessary arrangements with your financial institution, to meet a debit payment:
 - you or your account may be charged a fee and/or interest by your financial institution;
 - you or your account may be charged a fee to reimburse us for charges we have incurred for the failed transaction.
- 4.3 Please check your account statement to verify that the amounts debited from your account are correct.
- 4.4 If Commonwealth Bank of Australia is liable to pay goods and services tax (GST) on a supply made in connection with this agreement, then you agree to pay Commonwealth Bank of Australia on demand an amount equal to the GST included in the consideration payable for the supply.

004-037 300615 Page 3 of 4

Important notices (continued)

5. Dispute

- 5.1 If you believe that there has been an error in debiting your account, simply call 13 2015 between 8.30 am and 6 pm (Sydney time), Monday to Friday. We may ask you to confirm the details in writing to us.
- 5.2 If our investigations show that your account has been incorrectly debited, we will arrange for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount your account has been adjusted.
- 5.3 If our investigations show that your account has not been incorrectly debited, we will respond to your query by providing you with reasons and copies of any documents which we believe justify the view we have taken.
- 5.4 Any queries you may have about an error made in debiting your account should be directed to us in the first instance so we can attempt to resolve the matter. If we cannot resolve the matter, you can still refer it to your financial institution which will obtain details from you of the disputed transaction and may lodge a claim on your behalf.

6. Accounts

- 6.1 You should check:
 - with your financial institution whether direct debiting is available from your account as direct debiting is not available on all accounts offered by financial institutions;
 - your account details which you have provided to us are correct by checking them against a recent account statement; and
 - with your financial institution before completing the direct debit request if you have any queries about how to complete
 the direct debit request.
- 6.2 Warning: If the account number you have quoted is incorrect, you may be charged a fee to reimburse our costs in correcting any deductions from:
 - an account you do not have authority to operate; or
 - an account you do not own.

7. Confidentiality

- 7.1 We will keep any information (including your account details) in your direct debit request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.
- 7.2 We will only disclose information that we have about you:
 - to the extent specifically permitted by the law; or
 - for the purpose of this agreement (including disclosing information in connection with any query, dispute or claim).

8. Notice

8.1 If you wish to notify us in writing about anything relating to this agreement, you should write to:

Commonwealth Bank Superannuation Savings Account

Reply Paid 3306

Sydney NSW 2001

8.2 We will notify you by sending a notice in the ordinary post to the last address you notified to us.

004-037 300615 Page 4 of 4