

FirstChoice Personal Super withdrawal form

Is this the right form for me?

This form can be used to withdraw some or all of the units in your fund, as a rollover to another super fund, or to be withdrawn as cash – please note you must leave a minimum account balance of \$1,500 if you are making a partial withdrawal. If you wish to cash out your super, you must meet a condition of release and the eligibility criteria to receive a super benefit. The current Product Disclosure Statement can provide you with further information, or call us on 13 13 36.

You can read more about how to make a withdrawal from your fund, as well as details on how and when unit prices are calculated on the next page.

We also recommend you read the following information regarding potential implications your withdrawal may have on you or your investment before completing your request.

Some things to consider before making a withdrawal

1 Paying tax

Generally, if you roll over your super to another provider, you will not be taxed. However, if you make a cash withdrawal from a super fund, and if you're under 60, you may have to pay tax. If you're 60 or over, lump sum withdrawals and pension payments are tax free. Whether you're under or over 60, a cash withdrawal could affect your eligibility for tax offsets and entitlements. Your financial adviser can help you identify possible ways to ensure you don't have an unnecessary tax liability.

2 Loss of insurance cover

Many super funds offer insurance to members for death, total & permanent disablement or salary continuance cover. If you cash out or transfer your super, your insurance cover may cease. Insurance is an important benefit and you should consider issues like the need to complete new application forms and arrange medical examinations, whether it's possible that your premiums will increase, and if it's likely that you may be denied cover.

3 Reduction or loss of deduction for personal super contributions

If you're cashing out or transferring some or all of your super, this withdrawal could reduce your eligibility to claim a deduction for personal super contributions made during the current or previous financial year. Also, if you're requesting a rollover of some or all of your super to commence a pension, then this rollover could result in a loss of your eligibility to claim a deduction for any personal super contributions.

Generally, this will only apply to self-employed members (ie less than 10% of your combined assessable income, reportable fringe benefits and reportable employer super contributions are earned as an employee). You should speak with your financial adviser to determine if you are eligible to make a deduction, and help you identify possible ways to minimise this impact.

4 Falling short of your retirement goals

Super is a tax-effective way to save for retirement over the long term due to the favourable tax treatment of super savings. If you're 60 and over, all super benefits, both lump sum and pension, are tax free. If you make a cash withdrawal before you retire, you may not have enough for retirement and you may also lose any 'compounding effects' the lump sum may generate on your returns over the investment period.

5 Mistiming investment markets

If you're cashing out or transferring your super because of disappointing performance, you may be leaving the fund at an inappropriate time. If the value of your investment has fallen, you are only making a loss on paper. Selling your investment crystallises any losses you have made due to a decrease in the current unit price.

Have you spoken to your financial adviser?

Make sure you understand the potential impacts this withdrawal may have on your investment strategy. If you have a financial adviser, they can be invaluable in this process as they can review your situation and help you:

- · assess the impacts of the decision
- explain what may happen and discuss alternative options with you
- assist you in balancing your short-term goals with your long-term needs

If you don't have an adviser we are here to help so please call us on 13 13 36. Although we are not licensed financial advisers, we may be able to help you understand some of the implications of withdrawing, or refer you to a qualified financial adviser.

How do I make a withdrawal from my investment?

You can withdraw to rollover to another superannuation fund (not an income stream) at any time, subject to minimum account balance requirements. In any other case, you must meet a condition of release and the eligibility criteria for a super benefit. The current Product Disclosure Statement provides you with further information. You must also complete the attached Identification and Verification form so that we can establish your identity (if this has not already been completed). We normally pay a super benefit within seven working days of receiving your request. Longer periods may apply from time to time. In extraordinary circumstances, we may suspend or restrict withdrawals.

If you would like your super benefit to be credited to your bank account, original (ie not faxed) advice of your bank account details must be held or received at the time of the request.

If we receive your withdrawal request at our Sydney office before 3pm, Sydney time, on a NSW business day, the exit unit price calculated at the end of that day will apply. Where an option is suspended, restricted or unavailable, we may not process withdrawal requests. Any decisions whether to process withdrawals or partial withdrawals will be made in the best interests of investors as a whole, and if any payment is to be made, then the exit price used to calculate this payment will be the one determined at the time the payment is made. Withdrawals received after 3pm are calculated at the following day's exit unit price. Unless otherwise specified, the amount requested is net of lump sum tax. Should you wish to cancel your withdrawal request, you must advise us in writing or by fax before 3pm Sydney time on the day your original request is received by Colonial First State.

Temporary resident visa holders

From 1 April 2009, if you have at any stage been a temporary resident, you may only able to withdraw your super benefits under limited conditions of release. Please refer to our brochure for information on Temporary Residents available at colonialfirststate.com.au or by calling us on 13 13 36.

Regular Investment Plans

If you are withdrawing 100% from an option and you do not tell us how you would like your Regular Investment Plan allocated in section 6, we will use a default process to determine the allocation. This may include using the account allocation resulting from this withdrawal or your future investment weightings.

Unit prices and transaction processing

Colonial First State calculates unit prices each NSW business day. When you request to contribute, switch or withdraw your investment your request must be received before the relevant cut-off time (as outlined previously) and the unit price to be used for your request will be the next available unit price. The next available price is calculated, based on the market value of the option (less liabilities), for the close of business on the date of your request. We determine the market value of an option based on the information we have most recently available. If you ask for a unit price or investment valuation we can provide a historical unit price or investment valuation only. Should you then decide to transact, as outlined above you will receive the next available unit price or investment value. It is important to consider this when making your transaction requests. Please refer to a copy of the current Product Disclosure Statement (PDS) for further details.

Please phone Colonial First State Investor Services on 13 13 36 or send an email to contactus@colonialfirststate. com.au if you require further information in order to understand your benefit entitlements, including information about any fees or charges that may apply to any rollover you intend to make and information about the effect of the rollover on your benefit entitlements. You can also contact your financial adviser to discuss the effects of any roll-over you intend to make.

Anti-Money Laundering and Counter-Terrorism Financing laws and Sanctions laws

We are required to comply with these laws, including the need to establish your identity (and, if relevant, the identity of other persons associated with your account). Additionally, from time to time, we may require additional information to assist with this process. We may be required to report information about you to the relevant authorities. We may not be able to tell you when this occurs. We may not be able to transact with you or other persons. This may include delaying, blocking, freezing or refusing to process a transaction or ceasing to provide you with a product or service. This may impact on your investment and could result in a loss of income and principal invested.

FirstChoice Personal Super Withdrawal Form



Please phone Colonial First State Investor Services on 13 13 36 with any questions.

Please complete this form using BLACK INK and print well within the boxes in CAPITAL LETTERS. Mark appropriate answer boxes with a cross like the following X. Start at the left of each answer space and leave a gap between words.

SAVE FORM
PRINT FORM

Please complete all fields to ensure that we hold the correct details.

Fields marked with an asterisk (*) must be completed for the purposes of anti-money laundering laws.

1 INVESTOR DETAILS
1 INVESTOR DETAILS
FirstChoice Personal Super account number Have you discussed this transaction with your adviser?
0 1 0 Yes No
Title
Mr Mrs Miss Ms Other
Full given name(s)*
Surname* (Please supply relevant certified documents if details have changed)
Date of birth*
dd/mm/yyyy
Occupation and industry* (If retired, state RETIRED)
(If retired, state NETINED)
Vous main acumtured registance if not Augstralia*
Your main country of residence, if not Australia*
Residential address (PO Box is NOT acceptable)* Unit Street Street
number number street name
Suburb State Postcode Postcode
Country
Postal address for all communications and cheque payments (if applicable)
Cross (X) box where appropriate:
Same as residential address, as above
Same as existing postal address on account
Different address as provided below:
Unit number Street number PO Box Street name
Suburb State Postcode
Country
Work phone number
Email address
Liliali audiess

Please note: If you provide your email address, you agree that we may provide you with information including statements, transaction confirmations, promotions and our quarterly e-iQ newsletter by email. From time to time we may still need to send you letters in the post. If you wish to change your communication preferences or no longer wish to receive direct marketing from us, you can amend your communication preferences by logging on to FirstNet or contacting us on 13 13 36.

If you do not complete this section your request may be delayed. If you are completing a rollover request to another superannuation fund, you can proceed to Section 3 . If you are requesting to cash out your super benefit or requesting a rollover to commence a pension, you must complete the section below.
Cross (X) box as applicable
Australian citizen/resident
New Zealand citizen
Non-resident (has never been a temporary resident visa holder of Australia)
Holder of Retirement Visa subclass 405/410
f you have selected any of the above, please proceed to section 3 of this form.
Temporary resident visa holder of Australia
 Please complete section 10 – Temporary resident visa holder – Conditions of release. Please obtain the 'Temporary resident brochure for superannuation' available at colonialfirststate.com.au or by calling us on 13 13 36 for further information on the super benefits you are entitled to.
3 WITHDRAWAL INSTRUCTIONS
WITHDRAWAL AMOUNT
Unless otherwise indicated, the amount shown should be NET of tax and withdrawal adjustments. For investors making a Total & Permanent Disablement withdrawal, the amount received may be less than the amount requested, due to taxes and applicable levies.
I would like to close my account
OR
Leave minimum balance required (Minimum remaining account balance is \$1,500.) OR
I would like to withdraw \$
Please note: If you close your account without providing your Tax File Number, you may not be able to claim back any TFN tax that has been deducted.
PAYMENT DETAILS
This payment is to be:
Paid to me (complete Section 4)
OR
Rolled over to another superannuation fund(s) (complete Section 8)
WITHDRAWAL INVESTMENT OPTION/S – PARTIAL WITHDRAWALS ONLY
Cross (X) one box only. If no option is selected, we will redeem as per your existing investment weightings.
I would like this withdrawal to be made in line with my investment allocation on the date of this transaction. If you hold funds in a FirstRate Investment Deposit or FirstRate Term Deposit, we will exclude this from the transaction, unless otherwise advised below.
OR I would like this withdrawal to be made in line with existing auto-rebalancing weightings. OR
I would like this withdrawal to be made from my account as shown below. If this is a full withdrawal from an option, write 'balance' next to that option.
Please note: If you transact outside of existing auto-rebalancing weightings, we will automatically cancel this facility.

2 RESIDENCY DETAILS - THIS SECTION MUST BE COMPLETED

Option CODE		
(refer to the back page of this form)	Amount	
\$		
\$		
\$		
\$		<u></u>
\$		
		<u></u>]
		<u></u>
TOTAL \$		<u></u>
Credit Cheque Please note: If no payr 5 AUTO REBALANCI	Credit my Australian financial Mail a cheque to my address. nent method is selected, a che	institution account shown in section 7 Cheques issued are not bank cheques leque will be issued. u transact outside your future investment selection weightings, your transaction
Please note: The auto investment selection or unavailable options	o-rebalancing facility switches y weightings (excluding FirstRate s). Transaction costs may apply	your investments quarterly or annually to bring them in line with your future e Term Deposits, FirstRate Investment Deposits and any suspended, restricted y and there may be tax consequences of using the auto-rebalancing facility. You f you are clear on how the facility works.
Please note: The auto investment selection or unavailable options	o-rebalancing facility switches y weightings (excluding FirstRate s). Transaction costs may apply	your investments quarterly or annually to bring them in line with your future e Term Deposits, FirstRate Investment Deposits and any suspended, restricted y and there may be tax consequences of using the auto-rebalancing facility. You
Please note: The autoinvestment selection or unavailable options should only complete establish or re-establish wish to establish or reunderstand that the reuture investment selections.	o-rebalancing facility switches y weightings (excluding FirstRate s). Transaction costs may apply	your investments quarterly or annually to bring them in line with your future e Term Deposits, FirstRate Investment Deposits and any suspended, restricted y and there may be tax consequences of using the auto-rebalancing facility. You f you are clear on how the facility works. Frequency Please complete the frequency for your account. If you make no frequency alting from my Please complete the frequency for your account. If you make no frequency selection, we will rebalance

6 IMPORTANT INFORMATION ON YOUR ACCOUNT

If you are withdrawing the full balance of an investment option and have any of the following facilities, you will need to advise us of the investment option you wish to transfer this facility to.

REGULAR INVESTMENT PLAN

If you are withdrawing 100% from an option and you do not tell us how you would like your Regular Investment Plan allocated, we will use a default process to determine the allocation. This may include using the account allocation resulting from this withdrawal or your future investment weightings.

Option CODE (refer to the back page of	
this form)	Regular investment plan amount
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$

FUTURE INVESTMENT SELECTION

Please indicate below how you would like your future investments allocated. If you do not tell us how you would like your future investments allocated, we will allocate as per the investment weightings resulting from this withdrawal.

Option CODE (refer to the back page of this form)	%
TOTAL	100%

MANAGEMENT COST REBATE

You may be entitled to a management cost rebate (fee rebate and portfolio rebate). Refer to the current PDS for more details about eligibility.

Select the investment option for which any management cost rebate (fee rebate and portfolio rebate) that may be applicable is to be credited.

Option **CODE** (refer to back page of this form).

Please note: you must have a current account balance within this option in order to nominate it for rebate purposes.

If no option or more than one option or an invalid option is nominated, we will credit this rebate in the order outlined on the back of this form.

INSURANCE PREMIUMS

Indicate one option only

Option **CODE** (refer to the back page of this form)

If no option or more than one option or an invalid option is nominated we will deduct the premiums in the order outlined on the back page of this form.

I DETAILS OF ACCOUNT TO BE CHEDITED		
Please note: New bank account details via fax cannot be accepted. Please upload your form v	ia FirstNet or send	d to us by post.
Name of Australian financial institution		
Branch name		
Branch number (BSB) Account number		
Name of account holder		
You can only nominate a bank account that is held in your name. If you are rolling over to a se nominate an account held in the name of the fund.	If managed super	fund, you must
8 ROLLOVER DETAILS		
Complete this section if you would like your withdrawal to be rolled over to another institution. that you provide us with a valid Australian Business Number (ABN) or Unique Superannuation		all details and ensure
ROLLOVER 1		
Amount Account/Membership number of fund		
\$		
ABN AND USI		
Rollover institution, fund name (eg FirstChoice Pension)		
Teneral medication, rank name (eg. metericise reneral)		
Postal address		
Unit Street Street		
number PO Box name name]	
Suburb	State	Postcode
Country		
ROLLOVER 2		
Amount Account/Membership number of fund		
\$ L L L L L L L L L L L L L L L L L L L		
Rollover institution, fund name (eg FirstChoice Pension)		
Postal address		
Unit number Street number PO Box Street name		
	Ctata	Destands
Suburb	State	Postcode

Note: If you require more than 2 rollovers to another institution, please attach a signed letter with your withdrawal form with the above details.

9 TAX FILE NUMBER NOTIFICATION

I acknowledge that I am aware that:

- my provision, and your receipt, of my tax file number are authorised under the Superannuation Industry (Supervision) Act 1993
- if I provide my tax file number to you, you will use it only for legal purposes. This includes finding and identifying any superannuation benefits which you hold on my behalf, calculating tax on any superannuation benefits, calculating tax on my superannuation contributions and providing information to the Commissioner of Taxation. These purposes may change in future.

If I provide my TFN to you, I consent to you using it to:

- seek information about my superannuation accounts from the Australian Taxation Office (ATO) using the ATO's Supermatch program or other facility provided by the ATO, or
- · to locate information about superannuation accounts which I hold with other superannuation providers, and
- contacting those providers regarding my superannuation accounts.

I don't have to supply my tax file number, and if I choose not to, I will commit no offence. However, if I don't provide my tax file number:

- · more tax may become payable on my taxable superannuation contributions and superannuation benefits
- you may be required to refund any other superannuation contributions (including a personal or self-employed contribution) to me within 30 days less taxes, fees and costs and insurance premiums and reduced or increased for market movements, and
- in the future it may be more difficult to locate or amalgamate my superannuation benefits

These consequences may change in the future.

My tay file number in

If I provide my tax file number to you, you may provide it to another superannuation fund trustee or Retirement Savings Account provider to whom my superannuation benefits are to be rolled over, unless I request you not to do so in writing. You may also give my tax file number to the Commissioner of Taxation. In all other respects my TFN will be treated as confidential.

10 CC	ONDITIONS OF RELEASE
Please	indicate what type of super benefit you are eligible for. If you are, or once were, a temporary resident, please refer to Section 2
	retirement benefit – I am aged 55 to 64 and have permanently retired and never intend to become engaged in gainful mployment for 10 or more hours per week
а	retirement benefit – I am aged 60 to 64 and have ceased a gainful employment arrangement since turning age 60
а	retirement benefit – I am aged 65 or older
ar	n unpreserved cash benefit – I am withdrawing unrestricted non-preserved amounts only
	n unpreserved cash benefit – I am withdrawing restricted non-preserved amounts only and have terminated my employment with n employer who has contributed to this fund ¹
а	total and permanent disablement (TPD) benefit – I am permanently incapacitated¹
а	financial hardship benefit – I am in severe financial hardship¹
а	compassionate grounds benefit – Compassionate grounds as approved by the Department of Human Services (Medicare)¹
а	terminal illness benefit – I have a terminal medical condition¹
	pre-retirement pension – I am aged 55 to 64 but have not permanently retired and wish to commence a pre-retirement acome stream ¹
	ermination of gainful employment with a standard employer-sponsor of the regulated super fund on or after 1 July 1997 where ne member's preserved amounts in the fund at the same time of the termination are less than \$200
D be	eing a lost member who is found, and the value of whose benefit in the fund, when released, is less than \$200.
	read the 'How super and pensions work' section of our current PDS for more information on when you can be paid your super. ochure is available free of charge on our website at colonialfirststate.com.au or by calling Investor Services on 13 13 36.

CONDITIONS OF RELEASE (CONTINUED) TEMPORARY RESIDENT VISA HOLDER - CONDITIONS OF RELEASE Only complete this section if you are a temporary resident visa holder and wish to have any preserved or restricted non-preserved benefits paid to you or rolled over to an income stream. Please indicate what type of super benefit you are eligible for: a total and permanent disablement (TPD) benefit - I am permanently incapacitated1 a terminal illness benefit - I have a terminal medical condition¹ an unpreserved cash benefit – I am withdrawing unrestricted non-preserved amounts only (that existed prior to 1 April 2009) a retirement benefit - prior to 1 April 2009, I turned 55 to 64 and have permanently retired and never intend to become engaged in gainful employment for 10 or more hours per week1 a retirement benefit - prior to 1 April 2009, I turned aged 60 or older and ceased a gainful employment arrangement a retirement benefit - prior to 1 April 2009, I turned age 65 or older an unpreserved cash benefit - I am withdrawing restricted non-preserved amounts and prior to 1 April 2009, I terminated my employment with an employer who has contributed to this fund.¹ **11** DECLARATION AND SIGNATURE I declare that: • I have read and understood the important information provided with this form. • I have received and read the PDS and I acknowledge I have access to all statements and information that are incorporated by Investments in FirstChoice Personal Super USI FSF0217AU reference, together referred to as 'the PDS' (referred to as 'FirstChoice' or 'the fund') are offered from all details in this form are true and correct Colonial First State FirstChoice Superannuation Trust ABN 26 458 298 557 by Colonial First State Investments Limited if this form is signed under Power of Attorney, the Attorney ABN 98 002 348 352 AFS Licence 232468. declares that they have not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this application unless we have already sighted it) Original signature of member Print name

If you are signing under a Power of Attorney, please comply with the following:

· attach a certified copy of the Power of Attorney document

Date signed

- each page of the Power of Attorney document must be certified by a Justice of the Peace, Notary Public or Solicitor. Additional certification options are available from our 'Certification of documents list of prescribed persons' form at colonialfirststate.com. au/prospects/FS4523.pdf.
- should the Power of Attorney NOT contain a sample of the Attorney's signature, please also supply a certified copy of the identification documents for the Attorney, containing a sample of their signature, eg Drivers Licence, Passport, etc. The Attorney will also need to complete a power of attorney identification form which can be obtained from our forms library at colonialfirststate. com.au or by phoning Investor Services on 13 13 36.

Please send the completed form to:

Colonial First State, Reply Paid 27, Sydney NSW 2001

or via the secure online system (e-Post) with FirstNet Investor and FirstNet Adviser



Identification and Verification Form – individuals

Full name of member	

You or your adviser may also like to complete this form so that we can establish your identity (for the purposes of Anti-Money Laundering and Counter-Terrorism Financing laws) and assist us in processing any future request efficiently.

Financial advisers undertake identification and verification procedures by completing sections 1 to 2 of this form or by using other industry standard forms.

If you do not have a financial adviser, you are required to complete section 1 of this form and provide certified copies of the ID documents (do not send original documents).

The list of the parties who can certify copies of the documents is set out below. To be correctly certified we need the ID documents to be clearly noted 'True copy of the original document'. The party certifying the ID documents will also need to state what position they hold and sign and date the certified documents. If this certification does not appear, you may be asked to send in new certified documents.

List of persons who can certify documents1 (for the purposes of Anti-Money Laundering and Counter-Terrorism Financing laws):

- · Justice of the Peace
- Solicitor
- Police Officer
- Magistrate
- Notary Public (for the purposes of the Statutory Declaration Regulations 1993)
- Employee of Australia Post (with two or more years of continuous service)
- Your financial adviser (provided they have two or more years of continuous service)
- · Your accountant (provided they hold a current membership to a professional accounting body)
- Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)
- An officer of a bank, building society, credit union or finance company provided they have two or more years of continuous service.

SECTION 1: VERIFICATION PROCEDURE

Complete Part 1 (or if the individual does not own a document from Part 1, then complete either Part 2 or Part 3).

Part 1	Acceptable primary photographic ID documents
Cross X	Select ONE valid option from this section only
	Australian State/Territory driver's licence containing a photograph of the person
	Australian passport (a passport that has expired within the preceding two years is acceptable)
	Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
	Foreign passport or similar travel document containing a photograph and the signature of the person ²

Continued over the page...

¹ There are additional persons who can certify documents. A full list of the persons who can certify documents is available from our forms library at colonialfirststate.com.au

² Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above. Please refer to www.naati.com.au for further information.

Part 2	Acceptable secondary ID docume	ents – should only be cor	npleted if the individual does	s not own a document from Part 1
Cross X	Select ONE valid option from this	section		
	Australian birth certificate			
	Australian citizenship certificate			
	Pension card issued by Department of Human Services (previously known as Centrelink)			
Cross X	AND ONE valid option from this se	ection		
	A document issued by the Commo benefits to the individual and which			12 months that records the provision of financial ddress
	A Notice of Assessment issued by and residential address	y the Australian Taxation	Office within the preceding	12 months which contains the individual's name
	, ,	•		ng three months which records the provision ual's name and residential address)
	If under the age of 18, a notice the name and residential address			I within the preceding three months; and contains attended that school
Part 3	Acceptable foreign photographic	ID documents – should	only be completed if the ind	ividual does not own a document from Part 1
Cross X	Select ONE valid option from this	section only		
	Foreign driver's licence that conta	ins a photograph of the	person in whose name it is	issued and the individual's date of birth¹
	National ID card issued by a foreign was issued 1	gn government containir	ng a photograph and a signa	ature of the person in whose name the card
FINANCIAL A	DVISER USE ONLY			
Either at Alternation	 IMPORTANT NOTE: Either attach a legible certified copy of the ID documentation used to verify the individual (and any required translation) OR Alternatively, if agreed between your licensee and the product issuer, complete the Record of Verification Procedure section below and DO NOT attach copies of the ID documents 			
SECTION 2	: RECORD OF VERIFICATION	ON PROCEDURE		
ID document	details	Document 1		Document 2 (if required)
Verified from		Original	Certified copy	Original Certified copy
Document iss	uer			
Issue date		dd/mm/yyyy		dd/mm/yyyy
Expiry date		dd/mm/yyyy		dd/mm/yyyy
Document nu	mber			
Accredited En	glish translation	N/A Sig	ghted	N/A Sighted
FINANCIAL	. ADVISER DETAILS – iden	tification and veri	fication conducted b	by:
By completing and signing this Record of Verification Procedure I declare that I have verified the identity of the Customer as required by AML/CTF Rules and that this identification procedure has been performed by an AFSL holder or an authorised representative of an AFSL holder.				
AFS Licensee	e Name		AFSL No.	
Financial adv	iser name		Phone number	
Signature			Date verification comp	oleted
			dd/mm/yyyy	

¹ Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above. Please refer to www.naati.com.au for further information.

Please use the following CODES under section 3 of this form to indicate which investment option(s) you would like to withdraw from.

Please note: Where amounts are to be deducted from or credited to your investment, for example adviser service fees or management cost rebates (portfolio rebates) and no option or an invalid option has been nominated by you, a default order exists. Generally, the default order draws from or credits to the more conservative option first as determined by us. Please call Investor Services on 13 13 36 should you require further information.

Option name	Code
MULTI-MANAGER MULTI-SECTOR	
FirstChoice Defensive	001
FirstChoice Conservative	013
FirstChoice Moderate	014
FirstChoice Balanced	251
FirstChoice Growth	015
FirstChoice High Growth	032
FirstChoice Geared Growth Plus	240
MULTI-MANAGER SINGLE SECTOR	
FirstChoice Fixed Interest	012
FirstChoice Property Securities	018
FirstChoice Global Property Securities	204
FirstChoice Global Infrastructure Securities	205
FirstChoice Lower Volatility Australian Share	083
FirstChoice Australian Share	016
FirstChoice Australian Small Companies	071
FirstChoice Global Share	017
FirstChoice Global Share – Hedged	101
FirstChoice Asian Share	202
FirstChoice Emerging Markets	233
FirstChoice Alternatives	304
FirstChoice Geared Australian Share	206
FirstChoice Geared Global Share	046
FIRSTCHOICE MULTI-INDEX SERIES	
FirstChoice Multi-Index Conservative	005
FirstChoice Multi-Index Diversified	008
FirstChoice Multi-Index Balanced	022
FirstChoice Multi-Index High Growth	034
SINGLE MANAGER MULTI-SECTOR	
Conservative	
Colonial First State Conservative	004
Perpetual Conservative Growth	006
Moderate	
Colonial First State Balanced	007
Perpetual Diversified Growth	009
Growth	
BT Active Balanced	030
Colonial First State Diversified	021
Colonial First State Multi-Asset Real Return	222
Perpetual Balanced Growth	031
Schroder Real Return	303
UBS Tax Effective Income ¹	099
High growth	
Colonial First State High Growth	033
SINGLE MANAGER SINGLE SECTOR	
Cash and deposits	
Colonial First State Cash	011
FirstRate Investment Deposits – 04/2017 ²	850
FirstRate Investment Deposits – 04/2017	851
FirstRate Investment Deposits – 05/2018 ²	852
FirstRate Investment Deposits – 05/2018 FirstRate Investment Deposits – 12/2018 ²	853
1 Harvare Hisearment Dehosits - 12/ 2010	

Option name	Code
FirstRate Saver	800
FirstRate Term Deposit – 3 month ³	810
FirstRate Term Deposit – 6 month ³	811
FirstRate Term Deposit – 9 month ³	812
FirstRate Term Deposit – 12 month ³	813
FirstRate Term Deposit – 2 Year Monthly ³	400
FirstRate Term Deposit – 2 Year Annual ³	403
FirstRate Term Deposit – 3 Year Monthly ³	406
FirstRate Term Deposit – 3 Year Annual ³	409
FirstRate Term Deposit – 5 Year Monthly ³	418
FirstRate Term Deposit – 5 Year Annual ³	421
FirstRate Term Deposit – 7 Year Monthly ³	424
FirstRate Term Deposit – 7 Year Annual ³	427
FirstRate Term Deposit – 10 Year Monthly ³	430
FirstRate Term Deposit – 10 Year Annual ³	433
FirstRate Term Deposit – 15 Year Monthly ³	436
FirstRate Term Deposit – 15 Year Annual ³	439
Fixed interest and income	
Aberdeen Australian Fixed Income	003
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Acadian Defensive Income	236
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Colonial First State Imputation

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 $[\]ensuremath{\mathtt{1}}$ This option is only available to existing investors in this option.

² If you withdraw or switch from FirstRate Investment Deposits within the specified period, early withdrawal adjustments may apply.

³ If you withdraw or switch from FirstRate Term Deposits before maturity, early withdrawal adjustments may apply.