

FIRSTCHOICE EMPLOYER 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This form can be used to withdraw some or all of the units in your fund, as a rollover to another super fund, or to be withdrawn as cash – please note you must leave a minimum account balance of \$1,500 if you are making a partial withdrawal.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 1300 654 666.

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 generally tax free. Whether you're under or over 60, a cash withdrawal could affect your eligibility for certain 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. This is supplied at a group discount and often without underwriting. If you cash out or transfer your super, your insurance cover may cease and you will lose the benefits of being in an employer plan.

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 have made personal super contributions during this financial year or the previous financial year, and have not submitted to us (and had acknowledged by us) a valid 'notice of intent to claim or vary a deduction for personal super

contributions' form, this withdrawal/rollover could reduce your ability to claim a tax deduction for the personal contributions (including to Nil).

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 concessional environment to save for retirement over the long term. If you're 60 and over, all super benefits, both lump sum and pension, are generally 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 1300 654 666. 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.

**Colonial
First State**

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 applicable taxes and levies. Should you wish to cancel your withdrawal request, you must advise us before 3pm Sydney time on the day your original request is received by Colonial First State.

Temporary resident visa holders

If you have at any stage been a temporary resident, you may only be 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 1300 654 666.

Regular Investment Plans

If you do not select your Regular Investment Plan to be transferred to a new option and you are withdrawing 100% from an option, we will use a default process to determine the allocation of your Regular Investment Plan. This may include using the account allocation resulting from this withdrawal or your future investment weightings.

When can you be paid your super?

You can be paid your account balance as a benefit when you retire after reaching your preservation age, or meet another eligible condition of release. Your preservation age depends on your date of birth (as shown in the table below).

Date of birth	Preservation age
Before 1 July 1960	55
From 1 July 1960 to 30 June 1961	56
From 1 July 1961 to 30 June 1962	57
From 1 July 1962 to 30 June 1963	58
From 1 July 1963 to 30 June 1964	59
On or after 1 July 1964	60

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 Employer Services on 1300 654 666 or send an email to employer@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 Employer Super Withdrawal Form



Please phone Colonial First State Employer Services on 1300 654 666 with any enquiries.

SAVE FORM

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 . Start at the left of each answer space and leave a gap between words.

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

FirstChoice Employer Super account number

Have you discussed this transaction with your adviser?

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*

Occupation* (If retired, state RETIRED)

Your main country of residence, if not Australia*

Residential address (PO Box is NOT acceptable)*

Unit number Street number Street name

Suburb State 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

Home phone number

Mobile phone number

Email address

Why we ask for your email address and mobile number

- By providing this, you are consenting to receive statements, transaction and other account communications, education, market updates, significant event notices and other important information electronically.
- By providing your mobile number, you are consenting to its use for security validations. This will allow you to access communications such as your statement via email.

You are able to change your contact preferences at any time.

2 RESIDENCY DETAILS – THIS SECTION MUST BE COMPLETED

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

If 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 1300 654 666 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 applicable taxes, levies and withdrawal adjustments.

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.

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.

3 WITHDRAWAL INSTRUCTIONS (CONTINUED)

Option CODE (refer to the back page of this form)	Amount
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
TOTAL	\$ <input type="text"/>

Please note: If you have specified a restricted, suspended or unavailable option, we may not be able to process your request immediately. You should refer to our website for important information on any changes to the availability of particular investment options.

4 PAYMENT INSTRUCTIONS

Your instructions in this section overrides previous nominations. Only one method can be selected. Please cross (X) one:

Credit Credit my Australian financial institution account shown in **section 7**

Cheque Mail a cheque to my address. Cheques issued **are not** bank cheques

Please note: If no payment method is selected, a cheque will be issued.

5 AUTO REBALANCING

If you have auto-rebalancing on your account and you transact outside your future investment selection weightings, your transaction will cancel this facility. You should complete this section if you wish to re-establish the facility. **Please note:** This facility can only be established when the existing portfolio is invested 100% in options from the FirstChoice Lifestage and Select menu.

Please note: The auto-rebalancing facility switches your investments quarterly or annually to bring them in line with your future investment selection weightings (excluding any suspended, restricted or unavailable options). Buy/sell spreads may apply and there may be tax consequences of using the auto-rebalancing facility. You should only complete this section under advice or if you are clear on how the facility works.

Establish or re-establish auto-rebalancing facility

I wish to establish or re-establish auto-rebalancing on my account. I understand that the rebalancing weightings will be in line with my future investment selection, being the weightings resulting from my withdrawal details specified in **section 3** – ‘withdrawal instructions’.

Please complete the frequency for your account. If you make no frequency selection, we will rebalance your portfolio annually.

Frequency

Annually
(First business day after 14 May)

Quarterly
(First business day after 14 February, May, August and November)

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. **Please note:** Regular Investment Plans can only be established with options from the FirstChoice Lifestage and Select option menu.

Option CODE (refer to the back page of this form)	Regular investment plan amount
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
TOTAL	\$ <input type="text"/>

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. **Please note:** Future Investment Selection can only include options from the FirstChoice Lifestage and Select option menu.

Option CODE (refer to the back page of this form)	%
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
TOTAL	1 0 0 %

REBATE OPTION

You may be entitled to an administration fee rebate or Employer plan balance rebate. Refer to the current PDS for more details about eligibility.

Select the investment option for which any rebate that may be applicable is to be credited. **Please note:** You can only select options from the FirstChoice Lifestage and Select option menu.

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.

7 DETAILS OF ACCOUNT TO BE CREDITED

Please note: If you are advising us of new bank details, please upload your form via FirstNet or send 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 Self Managed Super Fund, you must nominate an account held in the name of the fund.

8 ROLLOVER DETAILS

Complete this section if you would like your withdrawal to be rolled over to another institution. Please complete all details and ensure that you provide us with a valid Australian Business Number (ABN) and Unique Superannuation Identifier (USI).

ROLLOVER 1

Amount

\$

Account/Membership number of fund

ABN

AND

USI

Rollover institution, fund name (eg FirstChoice Pension)

Postal address

Unit number Street number PO Box Street name

Suburb State Postcode

Country

ROLLOVER 2

Amount

\$

Account/Membership number of fund

ABN

AND

USI

Rollover institution, fund name (eg FirstChoice Pension)

Postal address

Unit number Street number PO Box Street name

Suburb State Postcode

Country

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.

By providing my Tax File Number (TFN), I consent to its use and disclosure as set out in the PDS. This includes to use my TFN to:

- search the ATO's SuperMatch program for other super accounts and
- seek more information from other super funds about the accounts found.

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 employer superannuation contributions and superannuation benefits
- you may be required to refund any other superannuation contributions (eg, personal contributions) 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.

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.

My tax file number is:

--	--	--	--	--	--	--	--	--	--

10 CONDITIONS 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.

- a retirement benefit – I am aged between my preservation age and age 64 and have permanently retired and do not intend to ever become gainfully employed again for 10 or more hours per week¹
- a retirement benefit – I am aged 60 to 64 and have ceased a gainful employment arrangement since turning age 60
- a retirement benefit – I am aged 65 or older
- an unpreserved cash benefit – I am withdrawing unrestricted non-preserved amounts only
- an unpreserved cash benefit – I am withdrawing restricted non-preserved amounts only and have terminated my employment with an employer who has contributed to this fund. I will provide a copy of my termination letter from my employer who contributed super to the fund.
- a total and permanent disablement (TPD) benefit – I am permanently incapacitated²
- a compassionate grounds benefit – Compassionate grounds as approved by the Australian Taxation Office (ATO)²
- a terminal illness benefit – I have a terminal medical condition²
- a pre-retirement pension – I am aged between my preservation age and age 64 but have not permanently retired and wish to commence a pre-retirement income stream¹
- termination of gainful employment with a standard employer-sponsor of the regulated super fund on or after 1 July 1997 where the member's preserved amounts in the fund at the same time of the termination are less than \$200
- being a lost member who is found, and the value of whose benefit in the fund, when released, is less than \$200.

Please read the 'How super works' section of our current PDS for more information on when you can be paid your super. The PDS is available free of charge on our website at colonialfirststate.com.au or by calling Employer Services on 1300 654 666.

1 Your preservation age depends on your date of birth. Refer to the section 'When can you be paid your super' on the attached instruction sheet.

2 We have additional requirements to process the withdrawal on these grounds. Please call Employer Services on 1300 654 666 for further information.

10 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 incapacitated²
- a terminal illness benefit – I have a terminal medical condition²
- 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 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.²

11 DECLARATION AND SIGNATURE

I declare that:

- I have access to the current PDS including all statements and information that are incorporated by reference and I have read or do not require such information
- all details in this form are true and correct
- if this form is signed under Power of Attorney, the Attorney 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)

- I have read and understood the important information provided with this form.

Investments in FirstChoice Employer Super USI FSF0361AU (referred to as 'FirstChoice' or 'the fund') are offered from Colonial First State FirstChoice Superannuation Trust ABN 26 458 298 557 by Colonial First State Investments Limited ABN 98 002 348 352 AFS Licence 232468.

Original signature of member

Print name

Date signed

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

- attach a certified copy of the Power of Attorney document
- 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.
- 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 Employer Services on 1300 654 666.

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.

This page has been left blank intentionally.

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 ID documents

Cross 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 law containing your photograph and proof of age

Foreign passport or similar travel document containing a photograph and the signature of the person²

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 documents – should only be completed if the individual does not own a document from Part 1

Cross Select ONE valid option from this section

- Australian birth certificate
- Australian citizenship certificate
- Pension card issued by Services Australia (Centrelink)

Cross AND ONE valid option from this section

- A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address
- A Notice of Assessment issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address. *Block out the TFN before scanning, copying or storing this document*
- A document issued by a local government body or utilities provider within the preceding three months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address)
- If under the age of 18, a notice that was issued to the individual by a school principal within the preceding three months; and contains the name and residential address; and records the period of time that the individual attended that school

Part 3 Acceptable foreign photographic ID documents – should only be completed if the individual does not own a document from Part 1

Cross Select ONE valid option from this section only

- Foreign driver's licence that contains 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 government containing a photograph and a signature of the person in whose name the card was issued¹

FINANCIAL ADVISER USE ONLY

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 PROCEDURE

ID document details	Document 1	Document 2 (if required)
Verified from	<input type="checkbox"/> Original <input type="checkbox"/> Certified copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified copy
Document issuer	<input type="text"/>	<input type="text"/>
Issue date	<input type="text" value="dd/mm/yyyy"/>	<input type="text" value="dd/mm/yyyy"/>
Expiry date	<input type="text" value="dd/mm/yyyy"/>	<input type="text" value="dd/mm/yyyy"/>
Document number	<input type="text"/>	<input type="text"/>
Accredited English translation	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted

FINANCIAL ADVISER DETAILS – identification and verification conducted 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, in the capacity of an AFSL holder or an authorised representative of an AFSL holder.

AFS Licensee Name	AFSL No.
<input type="text"/>	<input type="text"/>
<input type="text"/>	
Representative/Employee name	Phone number
<input type="text"/>	<input type="text"/>
<input type="text"/>	
Signature	Date verification completed
<input type="text"/>	<input type="text" value="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.

FirstChoice Lifestage and Select Option Menu

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 rebates or adviser service fees, 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 Employer Services on 1300 654 666 should you require further information.

Option name	Code
DEFAULT INVESTMENT OPTION	
FirstChoice Lifestage 1945–49	980
FirstChoice Lifestage 1950–54	981
FirstChoice Lifestage 1955–59	982
FirstChoice Lifestage 1960–64	983
FirstChoice Lifestage 1965–69	984
FirstChoice Lifestage 1970–74	985
FirstChoice Lifestage 1975–79	986
FirstChoice Lifestage 1980–84	987
FirstChoice Lifestage 1985–89	988
FirstChoice Lifestage 1990–94	989
FirstChoice Lifestage 1995–99	990
FirstChoice Lifestage 2000–04	991
SELECT INVESTMENT OPTIONS	
MULTI-MANAGER MULTI-SECTOR	
FirstChoice Defensive Select	911
FirstChoice Conservative Select	912
FirstChoice Diversified Select	948
FirstChoice Moderate Select	913
FirstChoice Balanced Select	914
FirstChoice Growth Select	915
FirstChoice High Growth Select	916
MULTI-MANAGER SINGLE SECTOR	
FirstChoice Fixed Interest Select	917
FirstChoice Australian Share Select	919
FirstChoice Australian Small Companies Select ³	920
FirstChoice Global Share Select	921
FirstChoice Property Securities Select ¹	918
FirstChoice Global Infrastructure Securities Select ¹	922
FIRSTCHOICE MULTI-INDEX SERIES	
FirstChoice Multi-Index Conservative Select	923
FirstChoice Multi-Index Diversified Select	925
FirstChoice Multi-Index Moderate Select	949
FirstChoice Multi-Index Balanced Select	924
FirstChoice Multi-Index Growth Select	951
FirstChoice Multi-Index High Growth Select	958
COLONIAL FIRST STATE INDEX SERIES	
Colonial First State Index Australian Share Select	934
Colonial First State Index Property Securities Select	931

Option name	Code
OTHER OPTIONS	
High Growth	
AZ Sestante Growth Select	954
Cash and Deposits	
FirstRate Saver Select	926
Short duration fixed interest	
Macquarie Income Opportunities Select	955
Diversified fixed interest	
Colonial First State Diversified Fixed Interest Select	928
UBS Diversified Fixed Income Select	929
Australian fixed interest	
Aberdeen Standard Australian Fixed Income Select	927
Alternatives² – Suggested to be no more than 20% of your portfolio	
Aspect Diversified Futures Select	947
Australian share	
Ausbil Australian Active Equity Select	935
Bennelong ex-20 Australian Equities Select	950
Fidelity Australian Equities Select	933
Perennial Value Australian Share Select	937
Schroder Australian Equity Select	936
T. Rowe Price Australian Equity Select	938
Australian share – small companies² – Suggested to be no more than 30% of your portfolio	
OC Premium Small Companies Select	957
Global share	
Magellan Global Share Select	943
MFS Global Equity Select	940
Platinum International Select	939
Realindex Global Share Select	944
Realindex Global Share – Hedged Select	945
Stewart Investors Worldwide Sustainability Select	960
T. Rowe Price Global Equity Select	959
Global share – emerging markets² – Suggested to be no more than 30% of your portfolio	
Platinum Asia Select	942
Realindex Emerging Markets Select	941
Australian property securities² – Suggested to be no more than 50% of your portfolio	
Ironbark Property Securities Select	930
Global property and infrastructure securities² – Suggested to be no more than 50% of your portfolio	
Colonial First State Global Property Securities Select	932
Magellan Infrastructure Select	956
G geared² – Suggested to be no more than 30% of your portfolio	
Colonial First State Geared Share Select	946

1 The trustee suggests that no more than 50% of your portfolio is invested in these investment options. See the Investment Options Menu for more information on diversifying your portfolio.

2 The trustee suggests that your portfolio holds no more of its value in these investment categories than the maximum limit shown. See the Investment Options Menu for more information on diversifying your portfolio.

3 The trustee suggests that no more than 30% of your portfolio is invested in this investment option. See the Investment Options Menu for more information on diversifying your portfolio.

This page has been left blank intentionally.