

Regular Withdrawal Facility form



Guide to completing this form

- Use this form to establish, change or cancel a Regular Withdrawal Facility for a LifeBuilder or ChildBuilder investment.
- Use this form to authorise us to withdraw funds from your nominated investment(s) and credit your nominated Australian financial institution account.
- Please use BLUE/BLACK ink and complete the applicable sections in BLOCK LETTERS.

Section 1

Investor details

1.1 Investor details

Bond number

Client number (if known)

Title

Given name(s)

Surname

Date of birth

D	D	/	M	M	/	Y	Y	Y	Y
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Section 2

Regular Withdrawal Facility instructions

2.1 Instructions

Please select one only.

Establish a Regular Withdrawal Facility
Please complete all sections of this form.

Change my Regular Withdrawal Facility
Please complete all sections of this form.

Cancel my Regular Withdrawal Facility
Please complete section 6.

Section 3

Frequency and amount of regular withdrawal

3.1 Regular withdrawal frequency

Monthly

Quarterly

Half yearly

Annually

Please note: Annually is the default option and will apply automatically if a selection is not made.

3.2 Regular withdrawal amount

Amount to withdraw for selected withdrawal period

IMPORTANT:

The Regular Withdrawal Facility is run on the 15th day of each month or the next business day. The minimum withdrawal amount for the Regular Withdrawal Facility is \$500 per month.

Withdrawal payments to commence

Section 4

Investments to be withdrawn from

4.1 Specify the investment options you want to withdraw from.

Please make the withdrawals according to my Default Investment Allocation.

Please make the withdrawals according to the specific investment allocations below.

Select whether to allocate in % or \$

%

\$

Please note: A minimum balance of \$500 must be maintained in each investment option and a minimum total balance of \$1,000 must remain in your account.

Please attach extra copies of this page if you need to provide more investment options than the space provided.

Option code	Option name	Amount to be withdrawn
Total amount (% or \$)		

Total dollar (\$) amount must equal the amount requested in Section 3.

Total percentage (%) amount must equal 100%.

Section 5

Financial institution details

5.1 Please provide your Australian financial institution information for the withdrawal payments

Branch name

Account name

BSB number

Account number

The account name with the above financial institution must be the same as the account name of the investment bond. Withdrawals cannot be paid to third parties.

Section 6

Declaration and signatures

6.1 Declaration

If this form is signed under Power of Attorney the attorney certifies that he/she has not received notice of revocation of that power.

If your power of attorney has not previously been registered by us, we will require a certified copy of the power of attorney document as well as the appropriate proof of identification documents in accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF Law).

For more information, please refer to the 'Completing proof of identity' document on our website.

I/We declare that all details in this form are true and correct.

I/We understand that any directions which I/we have given in this form will override any similar directions which I/we have previously given.

I/We authorise Generation Life Limited to execute transactions to commence or amend my/our Regular Withdrawal Facility instructions until further notice. I/We request you, until further notice in writing, to withdraw from my/our nominated investment options as described above to credit my/our nominated financial institution account in connection with my/our Regular Withdrawal Facility.

I/We confirm that I/we have received the latest Investment Bonds Product Disclosure Statement (PDS), and have read and understood the Regular Withdrawal Facility terms and conditions detailed within the PDS.

I/We understand that I/we may be required to provide additional proof of identification documents for the purposes of AML/CTF Law.

Investor 1

Full name (please print)

Signature

Date

 / /

Individual

Director

Trustee

Power of attorney

Investor 2

Full name (please print)

Signature

Date

 / /

Individual

Director

Trustee

Power of attorney



Outthinking today.

Please return completed form to:

GPO Box 263
Collins Street West
Melbourne VIC 8007

Enquiries

Investor services

1800 806 362

Adviser services

1800 333 657

Investment Bonds

LifeBuilder | ChildBuilder | FuneralBond

Generation Life is an Australian leader in investment bonds. We pride ourselves in providing an extensive investment menu with choice and quality for our investors.

genlife.com.au