

## Change of contact details form

Guide to completing this form	[
Use this form to change your contact details.	
Please complete these instructions in BLACK/BLUE INK using CAPITAL LETTERS (except for your email address).	
1. Investor details	
Client number (if known)  Account number	
investor name	
	]
	] 7
Date of birth (dd/mm/yyyy) (if applicable)	
2. New contact information	
Residential address Address (PO Box / RMB / Locked Bag is not acceptable)	
	_ ]
Suburb/City/Town Postcode State	
Country	_

C/- (if applicable)		
Address		
Suburb/City/Town	Postcode	State
Country		
Contact details		
Mobile number		
Phone number		
Email address		

## 3. Declaration and signatures

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

I/We authorise Generation Life Limited to process the instructions set out in this form.

We release, discharge and agree to indemnify Generation Life Limited and any other related body corporate from and against any action, proceeding claims, losses, liabilities or costs arising from processing the instructions set out in this form.

If this form is signed under Power of Attorney the attorney certifies that ne/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.

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

## Change of contact details form

Signature of Investor 1			
Name (please print)	You can submit this form by:		
	Mail: PO Box 263, Collins Street West		
Signature	Melbourne VIC 8007		
Date (dd/mm/yyyy)			
Please select the appropriate box			
Individual Trustee			
Power of			
Director attorney			
Signature of Investor 2			
Name (please print)			
Signature			
Date (dd/mm/yyyy)			
Please select the appropriate box			
Individual Trustee			
Director/Company Power of attorney			



Outthinking today.

Postal address

GPO Box 263, Collins Street West Melbourne VIC 8007 Email

enquiry@genlife.com.au

**Enquiries** 

Investor services: 1800 806 362 Adviser services: 1800 333 657

genlife.com.au