

Guide to completing this form

- Use this form to make a full or partial withdrawal from your LifeBuilder or ChildBuilder investment.
- Please use BLACK/BLOCK ink and complete the applicable sections in BLOCK LETTERS.

1. Investor details

Client number (if known)

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Account number

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Investor name

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Date of birth (dd/mm/yyyy)

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2. Withdrawal instruction

Please select one only.

- ☐ Full withdrawal. **Please proceed to Section 4.**

OR

- ☐ Partial withdrawal. Please specify the amount below.

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If selecting partial withdrawal, please complete all sections of this form.

Please note: The minimum partial withdrawal amount is \$500.

3. Partial withdrawal

☐ Pro-rata - Please withdraw from the same investment options and in the same proportions that I/we are currently invested in.

OR

☐ Please make the withdrawal according to the specific instructions below.

Select whether to allocate in % or \$

□ %

OR

\$

Please refer to the 'Generation Life Investment Menu' document on our website for fund codes.

Please list your partial withdrawal instructions.

Fund code	Fund name	Amount to be withdrawn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

Total dollar (\$) amount must equal the amount invested in Section 2.

Total percentage (%) amount must equal 100%.

Please note: A minimum balance of \$50 must be maintained in each investment option.

A minimum total balance of \$1,000 must remain in your account after your withdrawal, otherwise your investment bond may be closed and the remaining funds returned to you.

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

▶ FORM CONTINUES OVER PAGE

4. Financial institution details

Please provide your Australian financial institution information for the withdrawal payment.

Bank and branch name

Account name

BSB number

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Account number

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

5. 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.

I/We confirm that I/We have received a copy of the current Product Disclosure Statement (PDS) and have read and understood the PDS and agree to be bound by the terms and conditions set out in the PDS.

I/We understand that I/we may be required to provide additional proof of identification information for the purposes of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF Laws).

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 AML/CTF Laws.

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

Signature of Investor 1

Please select the appropriate box

☐ Individual ☐ Trustee ☐ Director ☐ Power of attorney

Name (please print)

Signature



Date (dd/mm/yyyy)

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Signature of Investor 2

Please select the appropriate box

☐ Individual ☐ Trustee ☐ Director/Company secretary ☐ Power of attorney

Name (please print)

Signature

Date (dd/mm/yyyy)

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You can submit this form by:

Email: enquiry@genlife.com.au

Mail: GPO Box 263, Collins Street West, Melbourne VIC 8007