

EstatePlanner Future Event Transfer Form

Generation Life Investment Bonds - LifeBuilder

Guide to completing this form

- Use this form to nominate or update your LifeBuilder Future Event transfer instructions.
- A Future Event transfer is not available for Company investors.

•		se use BLACK/BLUE ink and complete the applicable sections in BLOCK LETTERS.					
1.	Clier	restor details nt number (if known) punt number					
	Inves	stor name					
	Date	of birth (dd/mm/yyyy)					
2.	Fut	ture Event transfer(s) instructions Revoke/cancel all existing Future Event transfer instructions – complete Section 5. Add new Future Event transfer instructions – complete all Sections. Change/replace existing Future Event transfer instructions – complete all Sections.					
	Sele	Select the date or event that the future transfer of your LifeBuilder investment is to occur (select one only):					
		On death of the account owner(s). In the event of joint owners, the transfer will occur on the death of the last surviving joint owner. Note: This is applicable to individual or joint owners only.					
	OR						
		Date of future transfer (dd/mm/yyyy) To be completed only by individual or joint owners who have selected 'Date of future transfer'.					
	Please select how you would like your transfer to be handled in the event of your death (in the event of joint owners, the death of the last surviving joint owner) prior to the selected future transfer date above (select one only).						
		Transfer on the selected date in the event of my death before the selected future transfer date above (default). OR					
		Transfer on death of the account owner(s) in the event of my death before the selected future transfer date above.					
	If you have selected 'Transfer on the selected date in the event of my death before the selected future transfer date above', do yo restrict your estate representative from making a withdrawal, create a charge over the investment or transferring or assigning owr You may change this instruction at any time prior to your death.						
		Yes (default) No					

Please complete the transferee details on page 2. The transferee can only be a natural person.

Account Guardian election (individual or joint individual applicants only)

You can elect to nominate an Account Guardian to hold the investment on behalf of the nominated transferee where a transfer occurs either as a result of your death prior to the nominated transferee attaining 16 years of age on the effective transfer date, or the selected future transfer date is after your death. This election can be made by completing the Account Guardian form available on our website.

If no election is made, your investment will be held by your estate representative until your nominated transferee attains 16 years of age or the selected future transfer date is reached.

Further information about the Account Guardian facility can be found in the Product Disclosure Statement (PDS).

3. Transferee details

I/We wish to transfer ownership of my investment to:						
Title						
Full given name(s)						
Surname						
Date of birth (dd/mm/yyyy)						
Mobile number	Phone number					
Email address						
Address (PO Box / RMB / Locked Bag is not accepted)						
Suburb/City/Town	Postcode	State	Country			

► FORM CONTINUES OVER PAGE

Access to funds after transfer					
Nominate how and when funds can be accessed by the transferee under the Future Event transfer facility.					
No restrictions on accessing funds The transferee will be able to access the investment's funds immediately on transfer.					
OR					
Restrict access to funds (including the ability to set up a Regular Income Payment) The transferee will be able to access the investment's funds based on the below restrictions.					
Access to funds will be available after the following date (dd/mm/yyyy).					
This date will be used to determine when unrestricted access to funds occurs or the date after which a Regular Income Payment commence (where selected).					
Establish a future Regular Income Payment arrangement once the transferee has access to funds? (optional)					
The Regular Income Payment option is only available for initial investment amounts of \$10,000 and above. The minimum Regular Income Payment amount is \$100 per payment.					
Regular Income Payment frequency for the transferee to receive payments (select one only)					
Monthly Quarterly Half yearly Annually					
Regular Income Payment amount					
Select the % of the investment balance on transfer that will be the fixed per annum Regular Income Payment amount to be particularly based on the selected payment frequency					
%					
OR					
Select the fixed dollar amount per Regular Income Payment					
\$ per Regular Income Payment					
Regular Income Payment period (optional)					
Set the number of years after which the Regular Income Payment will end					
years					

Co-Signatory election

You can elect to nominate a Co-Signatory to authorise withdrawal requests made by the transferee before the fund access date or during a Regular Income Payment period. This election can be made by completing the Co-Signatory form available on our website.

If no election is made, your transferee will not be able to access funds until after the fund access date or other than those payable through the Regular Income Payment facility.

Further information about the Co-Signatory facility can be found in the PDS.

4. Important Future Event transfer information

The new owner (transferee) will be required to complete all identification verification requirements and any other requirements we may have prior to us registering the transfer.

The transferee will be registered as an additional life insured to this LifeBuilder investment.

The future event or date will be the Operative Date under the Product Rules.

The transfer will be completed once the future Operative Date has been attained and we have registered the transfer.

► FORM CONTINUES OVER PAGE

5. Declaration and signatures

I/We confirm that I/We have received a copy of the current 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 agree that if I/we transfer the above investments before the stated future event, then the nominations will be cancelled and revoked with effect as from the date of the transfer.

I/We cancel and revoke all previous Future Event transfer instructions made by me/us in respect to the above investment.

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.

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

Signature of investor i							
Please select the appropriate box							
Individual Trustee Director Power of attorney							
Name (please print)							
Signature	Date (dd/mm/yyyy)						
X	, , , , , , , , , , , , , , , , , , , ,						
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)						
X							
You can submit this form by:							
Email: enquiry@genlife.com.au							
Mail: GPO Box 263, Collins Street West, Melbourne VIC 8007							



Investor services: 1800 806 362 Adviser services: 1800 333 657 Outthinking today.