

Transfer of Ownership Form

Generation Life Investment Bonds - LifeBuilder and Childbuilder

Guide to completing this form

Use this form to transfer ownership of your LifeBuilder or ChildBuilder investment.

Transfer of ownership from the current owner to the new owner will occur on the transfer being registered by us. The registration of the transfer will revoke/cancel:

- all existing beneficiary nomination or future dated transfer instructions.
- the Adviser Representative facility or power of attorney nominated to act on behalf of the existing investor(s).
- all adviser service fee arrangements agreed between the current owner and the current financial adviser.
- the direct debit authorisation, Regular Savings Plan and Regular Withdrawal facility attached to the investment.
- Please use BLACK/BLUE ink and complete the applicable sections in BLOCK LETTERS.

Transfer of ownership will not change the life insured(s). The existing life insured(s) will remain on the investment. You can add additional life insured(s) on a LifeBuilder investment by completing Section 6.

Residency status for tax purposes

Under the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) laws, we are required to ask all investors to provide additional information about their tax residency. For the United States of America (US), tax residency can be as a result of citizenship or residency.

FATCA and CRS are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and many other foreign governments have agreements through their tax offices where reporting financial institutions are required to collect and report to the Australian Taxation Office (ATO) certain information about the tax residency of account holders. The ATO shares this information with the tax authorities of other jurisdictions. For more information, visit www.ato.gov.au.

1. Existing investor details

Current Investor 1

Client number (if known)	
Investor name (as held on the account)	
Date of birth (dd/mm/yyyy) (if applicable)	
Mobile number	Phone number
Email address	
Current Investor 2 (if jointly owned)	
Client number (if known)	
Investor name (as held on the account)	
Date of birth (dd/mm/yyyy) (if applicable)	

Mobile number	Phone number
Email address	

1.1 Applicable investments

These instructions are to apply to:

all LifeBuilder and/or ChildBuilder investments held

OR

the following investment bond(s) (please provide account number(s))

2. New investor details

To be completed by new owner(s).

Individual(s). Proceed to Section 3.

Company. Proceed to Section 4.

Trust (including trusts with individual trustees, corporate trustees and deceased estates). Proceed to Section 5.

3. Individual and joint account holders

Required identification documents

Certified copies of the following identification documents are required for each individual.

a current driver's licence (front and back) or passport (current or expired passport within the last 2 years)

OR

- a birth certificate and
- either a tax assessment (less than 12 months old), council rates notice or utilities provider account statement (less than 3 months old).

For other accepted forms of identification, please refer to the 'Completing proof of identity' document on our website.

If there are more than two joint holders, you will need to complete a separate form for the additional transferee.

3.1 Transferee 1 (must be at least 10 years old)

IMPORTANT: If aged from 10 to less than 16 years old then a parent or guardian must provide their consent by completing Section 3.2 below. **Personal details** (all correspondence will be sent to this investor)

Title			
Given name(s)			
Surname			
Date of birth (dd/mm/yyyy)	Occupation		
Phone number	Mobile phone numbe	sr	
Email address			
This email address may be used for investor correspondence.			
Residential address			
Address (PO Box / RMB / Locked Bag is not acceptable)			
Suburb/City/Town	Postcode	State	Country
Postal address (if different to residential address) (C/- if applicable)			
Address			
Suburb/City/Town	Postcode	State	Country
Correspondence will be sent to your postal address.			
Identification information			
AML/CTF Laws require that we collect this information. Your instruction	ons cannot be process	ed without this informa	ation.
Are you a Politically Exposed Person?			
Yes No			
Residency status for tax purposes	n Doporting Standard		wired to only all investors to
Under the Foreign Account Tax Compliance Act (FATCA) and Commo provide additional information about their tax residency. Please refer t more information.			
Are you a tax resident of Australia?			
Yes No			
Are you a tax resident of a country other than Australia or a Specified	U.S Person?		
Yes No			
If YES, you will need to complete a separate FATCA/CRS Self-Certific	ation Form available o	n our website.	
		1	FORM CONTINUES OVER PAGE

3.2 Transferee 2 (must be at least 10 years old) or Parent/Guardian

Personal details			
Title			
Given name(s)			
Surname			,
Date of birth (dd/mm/yyyy)	Occupation]
Phone number	Mobile phone numb	er	
Email address			
This email address may be used for investor correspondence.			
Residential address			
Address (PO Box / RMB / Locked Bag is not acceptable)			
Suburb/City/Town	Postcode	State	Country
Postal address (if different to residential address) (C/- if applicable)			
Address			
Suburb/City/Town	Postcode	State	Country
Identification information			
AML/CTF Laws require that we collect this information. Your instructi	ons cannot be process	sed without this inform	nation.
Are you a Politically Exposed Person?			
Yes No			
Residency status for tax purposes			
Under the Foreign Account Tax Compliance Act (FATCA) and Commo provide additional information about their tax residency. Please refer more information.			
Are you a tax resident of Australia?			
Yes No			
Are you a tax resident of a country other than Australia or a Specified	I U.S Person?		
Yes No			
If YES, you will need to complete a separate FATCA/CRS Self-Certific	cation Form available o	on our website.	

3.3 Authority to operate the account - where joint transferees apply (select only one)

Please elect which joint transferees have authority to operate the account and bind the other joint investor(s) for future transactions (including additional investments, switches and withdrawals).

All transferees (default) Transferee 1 Transferee 2 Eith	ner transferee
--	----------------

3.4 Sole trader (optional for individual account holders only)

Are you a sole trader?

Yes No. Please go to Section 6.

If you are a sole trader you will need to provide the following additional details.

Business name (if applicable)

Australian Business Number (ABN)										

Business address (if different to residential address) (PO Box / RMB / Locked Bag is not accepted)

Suburb/City/Town	I	Postcode	State	Country

4. Company

NOTE: Not available for ChildBuilder investments.

Required identification documents

Certified copies of the following identification documents are required.

a certificate of registration issued by ASIC

OR

- a current company search from the ASIC database
- Certified copies of the following identification documents are required for each director and beneficial owner.
- a current driver's licence (front and back) or passport (current or expired passport within the last 2 years)

OR

- a birth certificate and
- either a tax assessment (less than 12 months old), council rates notice or utilities provider account statement (less than 3 months old). For other accepted forms of identification, please refer to the 'Completing proof of identity' document on our website.

4.1 Company details

Full name of company			
ustralian Business Number (ABN) or Australian	Company Number (ACN)		
ompany contact person			
tle			
ven name(s)			
urname			
obile number	Business telep	phone number	
mail address			
nis email address may be used for investor cor egistered office ddress (PO Box / RMB / Locked Bag is not acc			
uburb/City/Town	Postcode	State	Country
ostal address (if different to registered office) /- if applicable)			
ddress			
Jburb/City/Town	Postcode	State	Country
prrespondence will be sent to your postal addr	ress.		
esidency status for tax purposes			
nder the Foreign Account Tax Compliance Act rovide additional information about their tax res			

Is the company a tax resident of Australia?

Yes No

more information.

IMPORTANT: You will need to complete a separate FATCA/CRS Self-Certification Form if any of the following apply to the company. This form is available on our website.

4.2

genlife.com.au

[
	Is the company a tax resident of a country other than Australia or a Specified U.S Person?
	Yes No
ļ	Is the company a U.S. Company, U.S. Trust or U.S. Partnership?
[Yes No
I	Is the company an Australian Financial Institution or Other Partner Jurisdiction Financial Institution?
[Yes No
	Director details (proprietary companies only)
I	Is the company a proprietary/private company (i.e. a Pty Ltd company)?
[Yes. Please continue below. No. Please go to section 6.
ļ	If there are more than two directors please attach their details to this form.
I	Director 1 details
	Title
1	Given name(s)
;	Surname
	Yes No Is the director a tax resident of Australia? Yes No
[Is the director a tax resident of a country other than Australia or a Specified U.S Person? Yes No If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website. Director 2 details Title Given name(s)
	Is the director a tax resident of a country other than Australia or a Specified U.S Person? Yes No If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website. Director 2 details Title Given name(s) Surname
	Is the director a tax resident of a country other than Australia or a Specified U.S Person? Yes No If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website. Director 2 details Title Given name(s) Surname
	Is the director a tax resident of a country other than Australia or a Specified U.S Person? Yes No If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website. Director 2 details Title Title Given name(s) Surname Director Self-Certification Form available on completing this form' section at the start of
	Is the director a tax resident of a country other than Australia or a Specified U.S Person? Yes No If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website. Director 2 details Title Given name(s) Surname Politically Exposed Person and residency status for tax purposes (Please refer to the 'Guide to completing this form' section at the start of this form for more information)
	Is the director a tax resident of a country other than Australia or a Specified U.S Person? Yes No If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website. Director 2 details Title Given name(s) Surname Politically Exposed Person and residency status for tax purposes (Please refer to the 'Guide to completing this form' section at the start of this form for more information) Is the director a Politically Exposed Person?

	Is the director a tax resident of a country other than Australia or a Specified U.S Person?								
	Yes No	Certification Form av	ailable on our website						
	Beneficial Owners (proprietary companies only)								
.4	Please provide full name and address details of those persons who or	wns or controls 25% c	or more of the issued o	capital of the company.					
	If there are more than three beneficial owners please attach their								
	Beneficial owner 1 details								
	Title								
	Given name(s)								
	Surname								
	Address								
	Suburb/City/Town	Postcode	State	Country					
	Politically Exposed Person and residency status for tax purposes this form for more information)	(Please refer to the 'G	auide to completing th	is form' section at the start of					
	Is the beneficial owner a Politically Exposed Person?								
	Yes No								
	Is the beneficial owner a tax resident of Australia?								
	Yes No								
	Is the beneficial owner a tax resident of a country other than Australia	or a Specified U.S Pe	erson?						
	Yes No								
	If YES, the beneficial owner will need to complete a separate FATCA/0	CRS Self-Certification	Form available on our	r website.					
	Beneficial owner 2 details								
	Title								
	Given name(s)								
	Surname								
	Address								
	Suburb/City/Town	Postcode	State	Country					

Politically Exposed Person and residency status for tax purposes this form for more information)	(Please refer to the 'G	Guide to completing th	is form' section at the start of
Is the beneficial owner a Politically Exposed Person?			
Yes No			
Is the beneficial owner a tax resident of Australia?			
Yes No			
Is the beneficial owner a tax resident of a country other than Australia	or a Specified U.S Pe	erson?	
Yes No			
If YES, the beneficial owner will need to complete a separate FATCA/C	RS Self-Certification	Form available on our	website.
Beneficial owner 3 details			
Title			
Given name(s)			
Surname			
Address			
Suburb/City/Town	Postcode	State	Country
Politically Exposed Person and residency status for tax purposes this form for more information)	(Please refer to the 'G	Guide to completing th	is form' section at the start of
Is the beneficial owner a Politically Exposed Person?			
Yes No			
Is the beneficial owner a tax resident of Australia?			
Yes No			
Is the beneficial owner a tax resident of a country other than Australia	or a Specified U.S Pe	erson?	
Yes No			
If YES, the beneficial owner will need to complete a separate FATCA/C	RS Self-Certification	Form available on our	website.

5. Trusts (including corporate trustees, individual trustees and deceased estates)

Required identification documents

For trusts that do not have an ABN

a certified copy of the trust deed or extracts of the trust deed showing the name of the trust, name and address of the settlor, amount of the initial settled sum, name(s) and address(es) of the trustee(s), the beneficiaries/unitholders, names/class(es) and the trust's execution page.

For individual Key Beneficial Owners of the Trust and individual trustees (including trustee of a deceased estate) certified copies of the following identification documents are required for each individual.

OR

- a birth certificate and
- either a tax assessment (less than 12 months old), council rates notice or utilities provider account statement (less than 3 months old).

For company Key Beneficial Owners and company trustees (including trustee of a deceased estate), please provide the identification documents in 'Required identification documents' in Section 4 - Company above.

For other accepted forms of identification, please refer to the 'Completing proof of identity' document on our website.

5.1 Trust details

Trust/Fund/Estate name

Business name (if applicable)

Australian Business Number (ABN) (if applicable) Т

Т

5.2 Type of trust

Please select the type of trust and provide the relevant information

Family trust or discretionery trust	Unit trust	Foreign trust	Testamentary trust (i.e. under a Will)
Other (please specify)			

Residency status for tax purposes

Under the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) laws, we are required to ask all investors to provide additional information about their tax residency. Please refer to the 'Guide to completing this form' section at the start of this form for more information.

Is the trust a tax resident of Australia?

Yes No

IMPORTANT: The trust will need to complete a separate FATCA/CRS Self-Certification Form if any of the following apply to the company. This form is available on our website.

er Jurisdiction Financial Institution?

Is the trust a tax resident of a country other than Australia or a Specified U.S Person?

	Yes	No
Is the	trust a U.S. Cor	npany, U.S. Trust or U.S. Partnership?
	Yes	No
Is the	trust an Australi	an Financial Institution or Other Partne
	Yes	No

3	Trust beneficiaries							
	Does the trust deed name the beneficiaries? Yes No							
	If YES, please list their full names. If there are more than four beneficiaries/unit holders, please provide details on a separate attachment to this form.							
	Beneficiary 1 full name (or entity name)							
	Are they Key Beneficial Owners?							
	Yes No							
	Beneficiary 2 full name (or entity name)							
	Are they Key Beneficial Owners?							
	Yes No							
	Beneficiary 3 full name (or entity name)							
	Are they Key Beneficial Owners?							
	Yes No							
	Beneficiary 4 full name (or entity name)							
	Are they Key Beneficial Owners?							
	Yes No							
	For any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed Person?							
	Yes No							
	For any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a country other than Australia or a Specified U.S Person? Please refer to the 'Guide to completing this form' section at the start of this form for more information.							
	Yes No							
	If YES, each Key Beneficial Owner who is a tax resident of a country other than Australia or a Specified U.S Person will need to complete a separate FATCA/CRS Self-Certification Form available on our website.							
	If the trust identifies its beneficiaries/unit holders by specified classes and/or by names and specified classes, please list the class below and also the beneficiaries named (if any) within specified classes:							
	1.							

2.

5.4 Trust settlor details

If the initial settled sum to establish the trust is \$10,000 or more, please provide name and address of the settlor(s) of the trust.

A settlor is the person or entity that subscribes for or settles the initial sum to create the trust.

Postcode	State	Country	
	Postcode	Postcode State	Postcode State Country

5.5 Type of trustee

Are you an individual trustee? (including trustee of a deceased estate)

Yes. Continue to Section 5.6.

No. Proceed to Section 5.7.

5.6 Individual trustee(s)

Trustee details			
Trustee 1			
Title			
Given name(s)			
Surname			
Date of birth (dd/mm/yyyy)	Occupation		
Mobile number	Phone number		
Email address			
This email address may be used for investor correspondence.			
Residential address Address (PO Box / RMB / Locked Bag is not acceptable)			
Suburb/City/Town	Postcode	State	Country
Postal address (if different to residential address) (C/- if applicable)			
Address			
Suburb/City/Town	Postcode	State	Country
Correspondence will be sent to your postal address.			
Politically Exposed Person and residency status for tax purposes this form for more information)	(Please refer to the 'G	uide to completing thi	s form' section at the start of
Is the trustee a Politically Exposed Person?			
Yes No			
Is the trustee a tax resident of Australia?			
Yes No			
Is the trustee a tax resident of a country other than Australia or a Spec	cified U.S Person?		
Yes No			
If YES, the trustee will need to complete a separate FATCA/CRS Self-	Certification Form ava	ilable on our website.	

Trustee 2			
Title			
Given name(s)]
Surname]
Date of birth (dd/mm/yyyy)	Occupation		
Mobile number	Phone number		
Email address			
This email address may be used for investor correspondence.			
Residential address Address (PO Box / RMB / Locked Bag is not acceptable)			
Suburb/City/Town	Postcode	State	Country
Postal address (if different to residential address)			
(C/- if applicable)			
Address			
Suburb/City/Town	Postcode	State	Country
Correspondence will be sent to your postal address.			
Politically Exposed Person and residency status for tax purposes this form for more information)	(Please refer to the 'G	uide to completing this	s form' section at the start of
Is the trustee a Politically Exposed Person?			
Yes No			
Is the trustee a tax resident of Australia?			
Yes No			
Is the trustee a tax resident of a country other than Australia or a Spec	ified U.S Person?		
Yes No			
If YES, the trustee will need to complete a separate FATCA/CRS Self-	Certification Form avai	lable on our website.	

5.7 Company as trustee

If there are more corporate trustees, repeat those details for each additional trustee and write the full name and address of each trustee down on a piece of paper and attach to this form.

Full name of company						
Australian Business Number (ABN) or Australian Company Number (A	ACN)					
Company contact person						
Title						
Given name(s)						
Surrama						
Surname						
Mobile number	Business number					
Email address						
This email address may be used for investor correspondence.						
Registered office Address (PO Box / RMB / Locked Bag is not acceptable)						
Suburb/City/Town	Postcode	State	Country			
Postal address (if different to registered office) (C/- if applicable)						
Address						
Address						
	Destanda					
Suburb/City/Town	Postcode	State	Country			
Correspondence will be sent to your postal address.						
Residency status for tax purposes	n Deporting Standard		a visad to cold all investors to			
Under the Foreign Account Tax Compliance Act (FATCA) and Commo provide additional information about their tax residency. Please refer to more information.						
Is the company a tax resident of Australia?						
Yes No						
IMPORTANT: You will need to complete a separate FATCA/CRS Self-Certification Form if any of the following apply to the company. This form is						

IMPORTANT: You will need to complete a separate FATCA/CRS Self-Certification Form if any of the following apply to the company. This form is available on our website.

Is the company a tax resident of a country other than Australia or a Specified U.S Person?
Yes No
Is the company a U.S. Company, U.S. Trust or U.S. Partnership?
Yes No
Is the company an Australian Financial Institution or Other Partner Jurisdiction Financial Institution?
Yes No
Director details (proprietary companies only)
Is the company a proprietary/private company (i.e. a Pty Ltd company)?
Yes. Please continue below. No. Please go to section 6.
If there are more than two directors please attach their details to this form.
Director 1 details
Title
Given name(s)
Surname
Politically Exposed Person and residency status for tax purposes (Please refer to the 'Guide to completing this form' section at the start of this form for more information)
Is the director a Politically Exposed Person?
Yes No
Is the director a tax resident of Australia?
Yes No
Is the director a tax resident of a country other than Australia or a Specified U.S Person?
Yes No
If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website. Director 2 details
Title
Given name(s)
Surname
Politically Exposed Person and residency status for tax purposes (Please refer to the 'Guide to completing this form' section at the start of this form for more information)
Is the director a Politically Exposed Person?
Yes No
Is the director a tax resident of Australia?
Yes No
► FORM CONTINUES OVER PAGE

Is the director a tax resident of a country other than Australia or a Specified U.S Person?

Yes No

If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website.

Beneficial Owners

To be completed by proprietary companies only.

Please provide full name and address details of those persons who owns or controls 25% or more of the issued capital of the company.

If there are more than three beneficial owners please attach their details to this form.

Beneficial owner 1 details

Title			
Given name(s)			
Surname			
Address			
Suburb/City/Town	Postcode	State	Country
Politically Exposed Person and residency status for tax purposes this form for more information)	(Please refer to the 'G	auide to completing this	s form' section at the start of
Is the beneficial owner a Politically Exposed Person?			
Is the beneficial owner a tax resident of Australia?			
Is the beneficial owner a tax resident of a country other than Australia	or a Specified U.S Pe	rson?	
If YES, the beneficial owner will need to complete a separate FATCA/0 Beneficial owner 2 details	CRS Self-Certification	Form available on our	website.
Title Given name(s)			
Surname			
Address			
Suburb/City/Town	Postcode	State	Country

Politically Exposed Person and residency status for tax purposes this form for more information)	(Please refer to the 'G	iuide to completing this	s form' section at the start of
Is the beneficial owner a Politically Exposed Person?			
Yes No			
Is the beneficial owner a tax resident of Australia?			
Yes No			
Is the beneficial owner a tax resident of a country other than Australia	or a Specified U.S Pe	rson?	
Yes No			
If YES, the beneficial owner will need to complete a separate FATCA/0	CRS Self-Certification	Form available on our	website.
Beneficial owner 3 details			
Title Given name(s)			
Surname			
Address			
Suburb/City/Town	Postcode	State	Country
Politically Exposed Person and residency status for tax purposes this form for more information)	(Please refer to the 'G	uide to completing this	s form' section at the start of
Is the beneficial owner a Politically Exposed Person?			
Yes No			
Is the beneficial owner a tax resident of Australia?			
Yes No			
Is the beneficial owner a tax resident of a country other than Australia	or a Specified U.S Pe	rson?	
Yes No			
If YES, the beneficial owner will need to complete a separate FATCA/0	CRS Self-Certification	Form available on our	website.

6. Life Insured

	The existing life insured(s) will remain registered on the account.						
	If the transfer relates to a ChildBuilder account, then the life insu	ıred (child) cannot be	changed or added t	0.			
	Is this a transfer of a LifeBuilder investment?						
	Yes. Please continue below. No. Proceed to S	Section 7.					
5.1	Investor(s) as the life insured						
	o you want the new investors named in Section 3 to be the life/(joint lives) insured?						
	Yes (default). Each new investor will be registered as the life/ li	ves insured.					
	No. Please provide additional life insured details below.						
.2	fe insured details						
	If there are more than two additional lives insured please attach	their details to this fo	rm.				
	Life insured 1 (if different to individual investors and for new corr	npany or trust owners)				
			,				
	Title						
	Given name(s)						
	Surname						
	Dete of hith (dd/mm/sau)						
	Date of birth (dd/mm/yyyy)	Occupation					
	Residential address (PO Box / RMB / Locked Bag is not accepted)						
	Suburb/City/Town	Postcode	State	Country			
	Life insured 2 (if required)						
	Title						
	Given name(s)						
	Surname						
	Date of birth (dd/mm/yyyy)	Occupation					
	Residential address (PO Box / RMB / Locked Bag is not accepted)						
	Suburb/City/Town	Postcode	State	Country			
				-			
				ι			
				FORM CONTINUES OVER PAGE			

7. New investor declaration and signature(s)

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.

New Investor 1

Please select the appropriate box	
Individual Trustee Director Power of attorney	
Name (please print)	
Signature	Date (dd/mm/yyyy)
New Investor 2	
Please select the appropriate box Individual Trustee Director / Company secretary Name (please print)	Power of attorney Parent / Guardian
Signature	Date (dd/mm/yyyy)

If signed under a 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 AML/CTF Laws.

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

8. Existing investor declaration and signature(s)

I/we being the investment owner(s) named above confirm that I/we am/are the legal and beneficial owner(s) of the above investment(s) and that I/ we have not transferred, assigned, mortgaged or charged the investment(s), or any rights or interests under the investment(s). I/we transfer my/ our rights, powers and interest in the above investment(s) to the person(s) named above as the Transferee(s), and further acknowledge that any beneficiary nomination or Future Event transfer that I/we have made will be revoked and cancelled.

Existing investor 1

Please select the appropriate box	
Individual Trustee Director Power of attorney	
Name (please print)	
Signature	Date (dd/mm/yyyy)
Existing investor 2	
Please select the appropriate box	
Individual Trustee Director / Company secretary	Power of attorney Parent / Guardian
Name (please print)	
Signature	Date (dd/mm/yyyy)

If signed under a 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 AML/CTF Laws.

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

You can submit this form by: Email: enquiry@genlife.com.au Mail: 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

Outthinking today.