

## 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.
- Please use BLACK/BLEU ink and complete the applicable sections in BLOCK LETTERS.

## 1. Investor details

Client number (if known)

--	--	--	--	--	--	--	--	--	--

Account number

--	--	--	--	--	--	--	--	--	--

Account owner(s)


## 2. Future Event transfer 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.**

**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) – (Only available to individual or joint owners)**

In the event of joint owners, the transfer will occur on the death of the last surviving joint owner.

**Important:** If your nominated individual transferee is aged below 16 years of age at the time of transfer, the estate representative of the last surviving owner will hold the investment on trust (on behalf and for the benefit of the nominated transferee) until they attain 16 years of age, after which ownership will pass to the nominated transferee outright, unless an Account Guardian is nominated to hold and administer the investment on behalf and for the benefit of the nominated transferee until they attain 16 years of age, after which ownership will pass to the nominated transferee outright (refer below for more information about Account Guardians).

**OR**

- ☐ **Date of future transfer** (dd/mm/yyyy) 

--	--

 / 

--	--

 / 

--	--	--	--

**Important:** If your nominated individual transferee is aged below 16 years of age at the date of future transfer or if the last surviving owner passes away before the selected date of future transfer, you (or the estate representative of the last surviving owner) will hold the investment on trust (on behalf and for the benefit of the nominated transferee) until they attain 16 years of age or the selected date of future transfer (whichever is later), after which ownership will pass to the nominated transferee outright, unless an Account Guardian is nominated to hold and administer the investment on behalf and for the benefit of the nominated transferee until they attain 16 years of age, after which ownership will pass to the nominated transferee outright (refer below for more information about Account Guardians).

Please refer to the PDS for more information.

For 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 death of the account owner(s) in the event of my/our death before the selected future transfer date above.

**OR**

- ☐ Transfer on the selected date in the event of my/our death before the selected future transfer date above (default).

► FORM CONTINUES OVER PAGE

If the estate representative of the last surviving owner is required to hold the investment on behalf and for the benefit of the nominated transferee, do you wish to restrict the estate representative's ability to make a withdrawal from your investment, surrender, transfer or assign ownership of the investment or use the investment as security while the investment is being held on behalf and for the benefit of your nominated transferee? You may change this instruction at any time prior to your death.

☐ Yes (default) ☐ No

#### Account Guardian nomination

An Account Guardian can be nominated to temporarily hold a LifeBuilder investment on behalf and for the benefit of the nominated transferee where:

- a Future Event Transfer on the death of the last surviving owner has been requested, and the nominated transferee has not attained 16 years of age on the transfer event date; or
- the nominated transferee is below 16 years of age on the selected date of the Future Event Transfer or immediate transfer date; or
- the selected date of future transfer is after your death.

This election can be made by completing the Account Guardian Nomination form available on our website.

If no election is made, the account will be maintained by you (or the last surviving owner for joint accounts) or the estate representative of the last surviving owner to hold and administer on trust (on behalf and for the benefit of the nominated transferee) until your nominated transferee attains 16 years of age, or the selected future transfer date is reached (whichever is later), after which ownership will pass to the nominated transferee outright.

Further information about the Account Guardian facility can be found in the PDS.

### 3. Transferee details

I/We wish to transfer ownership of my investment to:

#### Individual transferee details

☐ 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

OR

☐ **Trust transferee details**

Trust name

Trust Australian Business Number (ABN)

Trust establishment date (dd/mm/yyyy)

 /  / 

**Important:** If you are nominating a trust as a Future Event Transferee, you should ensure the continuity of the account on transfer date and post transfer. Once the last surviving life insured passes, the investment will ordinarily mature, and the proceeds paid out. Please consider nominating a life insured who would likely be living at the time of transfer and beyond to ensure continuity of investment. Nominating a life insured can be made using the Life Insured and Change to Investment Term form available on our website.

☐ **Individual trustee details**

Title

Given name(s)

Date of birth (dd/mm/yyyy)

 /  / 

Mobile number

Phone number

Email address (This email address may be used for investor correspondence)

Address (PO Box / RMB / Locked Bag is not accepted)

Suburb/City/Town

Postcode

State

Country

OR

☐ **Company trustee details**

Full name of company

Company Australian Business Number (ABN)

**Company trustee contact person**

Title

Given name(s)

Surname

Mobile number

Phone number

Email address (This email address may be used for investor correspondence.)

Company registered office address (PO Box/RMB/Locked Bag is not acceptable)

Suburb/City/Town

Postcode

State

Country

**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 will 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 ☐ AnnuallyRegular Income Payment amount

Select the % of the investment balance on transfer that will be the fixed per annum Regular Income Payment amount to be paid equally based on the selected payment frequency

 %**OR**

Select the fixed dollar amount per Regular Income Payment

 \$ per Regular Income PaymentRegular Income Payment period (optional)

Set the number of years after which the Regular Income Payment will end

 years**Co-signatory nomination**

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 Nomination 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 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

Where the transferee is a person, the transferee will be registered as a life insured on this LifeBuilder investment.

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.

#### 5. Declaration and signatures

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 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 1

Please select the appropriate box

☐ Individual ☐ Trustee ☐ Director ☐ Power of attorney

Name (please print)

Signature

Date (dd/mm/yyyy)

 /  / 

##### 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)

 /  / 

##### You can submit this form by:

**Email:** enquiry@genlife.com.au

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