

# Lifepan FlexiGrowth Investment Additional Deposit Form



Please **PRINT** clearly in Black pen keeping well within the boxes.  
Start at the left, write one letter in each box and leave one box between words.  
Use crosses in the boxes marked with an 'X'.

## A. INVESTOR(S) DETAILS

Last name

First name

Address

Suburb

State  Postcode

Phone Number  Mobile Phone

## B. INVESTOR DETAILS

Policy Number  Start Date

## INVESTOR OPTION SELECTION

Capital Guaranteed Option	\$	<input type="text"/>	or %	<input type="text"/>
Income Option	\$	<input type="text"/>	or %	<input type="text"/>
Cash Enhanced Option	\$	<input type="text"/>	or %	<input type="text"/>
High Yield Option	\$	<input type="text"/>	or %	<input type="text"/>
<b>Total</b>	\$	<input type="text"/>	or %	<input type="text"/>

Total % must equal 100%

If no Option is selected, the deposit amount will be disbursed to your policy as per your existing investment Option percentages.

## C. METHOD OF PAYMENT



Biller Code 899138. For details of your Customer Reference number, please call our Customer Service Team on 1300 1300 38.



Cheques: To be made payable to Lifepan Australia Friendly Society Limited. Third party cheques are not accepted.

## D. DECLARATION

I/we confirm that I/we have a copy of the current Product Disclosure Statement and that I/we have read, understood and retained this for future reference.

Signature of Investor 1

Signature of Investor 2



Date

Date

