

Regular Income Option

Investor Details:

Please indicate if this request is to initiate change cancel

Investor(s) Name

Address

Suburb

State

Postcode

Contact Phone

Policy Number

Please pay my income into the bank, building society or credit union shown below

Account Details:

Name of Financial Institution

Branch Name & Number

Address of Financial Institution

Suburb

State

Postcode

Account Holder's Name

Account Number (up to 9 digits)

Notes:

- This Authority will remain in force until written notice is received by Lifeplan to cancel/alter this authority.
- The investor(s) must be the bank account owner.

Investor 1 Signature

Date

Investor 2 Signature

Date