

# Lifeplan TaxSmart Investments Nomination of Beneficiary 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". **DECLARATION**

## A. INVESTOR(S) DETAILS

Last name

First name

Address

Suburb

State  Postcode  Policy Number

Phone number  Mobile Phone

## B. DECLARATION

I/we \_\_\_\_\_  
holder/s of the above policy, hereby revoke any nomination previously made by me/us in respect to the monies payable on my/our death, and I/we hereby nominate the beneficiaries set out hereunder, to receive the said monies payable upon my/our death in accordance with the Fund Rules.

## C. BENEFICIARY/IES - PLEASE WRITE IN BLOCK CAPITALS

### Beneficiary 1

Beneficiary's Full Name

Address

Date of Birth         % of Benefit   %

Relationship to investor(s)

### Beneficiary 2

Beneficiary's Full Name

Address

Date of Birth         % of Benefit   %

Relationship to investor(s)

### Beneficiary 3

Beneficiary's Full Name

Address

Date of Birth         % of Benefit   %

Relationship to investor(s)

\* Ensure that the total proportion payable is equal to 100%

## D. SIGNATURE(S)

Signature of Investor 1

Signature of Investor 2

Date

Date