

Withdrawal Request Form



Please use **BLOCK** letters and a black or blue pen to complete this form.

Please indicate using an "X" where appropriate. If a section does not apply to you, please indicate using "N/A".

Office use only

1. Investor details

Account number	<input type="text"/>																								
Name of Fund	<input type="text"/>																								
Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="text"/>																				
Surname	<input type="text"/>																								
Given name(s)	<input type="text"/>																								
Date of birth	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>														
Address	<input type="text"/>																								
Suburb	<input type="text"/>																				State	<input type="text"/>			
Postcode	<input type="text"/>				Country (if not Australia)	<input type="text"/>																			
Contact number (business hours)	<input type="text"/>				Fax number				<input type="text"/>																
Email	<input type="text"/>																								
Preferred contact method	<input type="checkbox"/> Phone	<input type="checkbox"/> Email	<input type="text"/>																						

I hereby give notice that I wish to make a withdrawal as follows:

For the amount in dollars \$,,

OR Amount in Units (number) ,,

OR My investment in full (please tick box)

2. Details of your Bank, Building Society, Credit Union or CMT account

All proceeds will be paid to the account you nominate below. Please note that cheque payments and third party payments will not be made. Name and address of your Bank, Building Society, Credit Union or CMT account where account is held

Name of Financial Institution	<input type="text"/>
Account name	<input type="text"/>
Branch number (BSB)	<input type="text"/>
Account number	<input type="text"/>

3. Declarations and signatures

All account signatories must sign below

Signature of Investor 1 / Director

Signature	<input type="text"/>
Print Name	<input type="text"/>
Date	<input type="text"/>

Signature of Investor 2 / Director / Company Secretary

Signature	<input type="text"/>
Print Name	<input type="text"/>
Date	<input type="text"/>

Common Seal
SIGN HERE

Please note: All account holders must sign for a joint account. If signed under a Power of Attorney, the Attorney verifies that no notice of revocation of that power has been received. An original or certified copy of the power of attorney must be provided if not provided previously. Company applications must be signed in accordance with their Constitution. Sole signatories signing on behalf of a company must confirm that they are signing as sole director and as sole secretary of the company.

A verification document is required in support of this redemption request. Please provide a certified copy of any of the following that verify your (the applicants) name, date of birth and current address:

Please place a tick in the document type that you have supplied.

Birth Certificate Citizenship Certificate Pension Card Drivers Licence Passport

Further information regarding Certification of documents can be found at on following page.

Please send your completed form to:

Australian Unity Investments
Reply Paid 64466
South Melbourne VIC 3205

Or fax your completed form to:

(03) 8682 5057
and send the original form to the address indicated at left.

Certification of documents

Where your identification documents need to be certified, we suggest that the person certifying the document(s) for you use the following statement on the copy being certified:

'I certify this to be a true copy of [name of document] the original of which, was produced to me at the time of signing.'

The document must also be dated, and have the signature, printed name, occupation, employer and address of the person certifying the document.

Some persons who may certify copies of original documents are:

- Officer with or authorised representative by an Australian Financial Services licence holder with 2 or more years of continuous service with one or more licensees
- Chartered Accountant, CPA or member of the National Institute of Accountants with 2 or more years of continuous membership
- Officer of a financial institution or finance company with 2 or more year continuous service with one or more institutions or companies
- Permanent employee of the Australian Postal Corporation with 2 or more years continuous service, or someone who operates as an agent of the Australian Postal Corporation
- Police Officer
- Lawyer, magistrate, registrar of a Court, Justice of the Peace
- Notary Public

Contact us

Investor Services

T 13 29 39

F 03 8682 5057

Australian Unity Investments

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South Melbourne Vic 3205

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Email:

investments@australianunity.com.au