



IOOF

ESSENTIAL INVESTMENT

1 July 2022

Withdrawal Form

Please complete these instructions in BLACK INK using CAPITAL LETTERS and ✓ boxes where provided.

Step 1: Client details

Account number

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Account name

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Step 2: Withdrawal instructions

☐ Full withdrawal (Please proceed to Step 3)

OR

☐ Partial withdrawal

Please specify amount \$

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Partial withdrawals only – investment options to be redeemed

Investment fund name	Amount	OR Allocation (%)
<table border="1" style="width: 100%; height: 20px;"></table>	\$ <table border="1" style="width: 150px; height: 20px;"></table>	<table border="1" style="width: 80px; height: 20px;"></table>
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If you do not select the investment options to be redeemed, your investments will be redeemed on the basis of your existing nominated Cash Account top-up method.

Note: Partial withdrawals must be for \$2,000 or more in total and \$200 per managed investment option.

Step 3: Financial institution details

☐ Please pay the withdrawal to my nominated financial institution.

OR

☐ Please pay the withdrawal to the following financial institution details:

Name of financial institution

Account name

BSB - Account number

☐ I want to update my nominated financial institution with the above details for all future withdrawals.

Note:

- If withdrawing to a new bank account and there are multiple signatories (for example joint accounts or accounts with multiple trustees), all signatories are required to sign in Step 4.
- Ensure your account details are correct as we will not be liable for mistaken payments based on incorrect details.

Step 4: Client declaration and signature(s)

Important note: The Service Operator collects the information in this form in order to process your investment instructions. Any personal information provided in this form will be handled in accordance with the Service Operator's privacy policy, available at www.ioof.com.au/privacy.

By signing this request form I am/we are making the following statements:

- I/We declare I/we have fully read this form and the information completed is true and correct.
- I/We understand that all investment options will be converted to cash prior to transferring out of this account.

Please note: If this form is signed under Power of Attorney, the Attorney declares that they have not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this form unless we have already received it). You generally cannot sign under Power of Attorney if acting on behalf on entity.

Signature

Signatory 1 Date / /

Role (such as Investor/Director/Trustee as applicable)

Full name

Additional signatures (if required)

Signatory 2 Date / /

Role (such as Investor/Director/Trustee as applicable)

Full name

Signatory 3 Date / /

Role (such as Investor/Director/Trustee as applicable)

Full name

Signatory 4

Date / /

Role (such as Investor/Director/Trustee as applicable)

Full name

Signatory 5

Date / /

Role (such as Investor/Director/Trustee as applicable)

Full name

Signatory 6

Date / /

Role (such as Investor/Director/Trustee as applicable)

Full name

Common seal
(of company) if required

Please forward all correspondence and enquiries to

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Web

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