



IOOF

ESSENTIAL SUPER

1 July 2019

Additional Lump Sum Contribution

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

Step 1: Member details

Account number

Title (Dr/Mr/Mrs/Ms/Miss) Surname

Given name(s)

Phone (home) Phone (work)

Mobile

Email

Date of birth / /

Step 2: Contribution eligibility requirement

I am under age 65.

OR

I am over 65 and under 75 years of age. I have worked at least 40 hours over 30 consecutive days during this financial year.

OR

I am over 65 and making a downsizer contribution. You must provide us with a completed ATO downsizer contribution form before or at the time of making your downsizer contribution. This form is available from the ATO website.

OR

I am over 65 and under 75 years of age. I have worked at least 40 hours over 30 consecutive days during the previous financial year, my total super balance was less than \$300,000 as at the previous 30 June and I have not previously used the work test exemption.

Step 3a: Contribution payment information

Important: For any initial deposit equal to or more than \$2 million you must also complete a High Threshold Transaction Form separate to this application form. The High Threshold Transaction Form can be accessed on our website www.ioof.com.au

Personal contribution	\$	<input style="width: 95%;" type="text"/>
Spouse contribution	\$	<input style="width: 95%;" type="text"/>
Downsizer contribution	\$	<input style="width: 95%;" type="text"/>
Total	\$	<input style="width: 95%;" type="text"/>

IOOF Essential offers you the convenience of B_{PAY}[®]. To take advantage of this facility, contact ClientFirst for details. If paying by cheque, please make payable to 'IOOF Essential Super' – [your full name or account number] and return to **IOOF Essential, GPO Box 264, Melbourne VIC 3001**

°Registered to B_{PAY} Pty Ltd ABN 69 079 137 518.

Step 3b: Member Advice Fee – Upfront

Up to a maximum of 5.5% of each contribution. % (only complete if this fee has not been previously nominated)

Step 4: Investment options

Please DO NOT complete this section if this contribution is being invested in accordance with your existing investment strategy. You may nominate a unique investment option for this contribution by placing the required percentage of each investment in the space below and must include at least the default minimum allocation of 1% against the Cash Account. The option selected is for this contribution only. Your existing investment strategy WILL NOT be changed.

Prior to making your selection, the Trustee strongly recommends that you consider obtaining professional advice from a licensed financial adviser. Before making any decisions regarding an investment option, please read the relevant Product Disclosure Statement (PDS), which is available from www.ioof.com.au, by contacting ClientFirst or from your licensed financial adviser. Our website provides a detailed list of available investments and underlying investment manager fees.

Investment code ¹	Investment fund name	Allocation (%)
<input style="width: 100%;" type="text"/>	Cash Account (Mandatory)	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Total (must = 100%)		<input style="width: 100%;" type="text"/>

¹ Refer to the Investment Options Menu for available investment codes. This is available from your licensed financial adviser, our website or by contacting ClientFirst.

Step 5: Adviser declaration

I declare that I have given the member the fund PDS and the PDS for the underlying investment managers selected.

Adviser name																												
Licensee name																												
AFS license number					Adviser code					Dealer code																		
Adviser signature																	Date			/			/					

Step 6: Member declaration

Important note: The Trustee 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 Trustee's privacy policy, available at www.ioof.com.au/privacy. If you do not provide all of the requested information, we may not be able to action your request.

- I consent that where I have chosen an investment with a long withdrawal period (illiquid investments) or there are delays receiving proceeds from selling my investments, any withdrawal or transfer request may be delayed for more than 30 days.
- I confirm I have received and considered the relevant PDS for each of the investment options selected.
- I consent to the collection and use of the above information by the Trustee for the purposes specified in the PDS
- I authorise the Trustee to charge the member advice fee selected in Step 3 against my account (if applicable).

Member signature																	Date			/			/				
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Please forward all correspondence and enquiries to

Post: IOOF Essential
GPO Box 264, Melbourne VIC 3001

Email: clientfirst@ioof.com.au

Telephone: 1800 913 118

Web: www.ioof.com.au