



## Step 2: Regular Withdrawal Plan

Establish a Regular Withdrawal Plan

**OR**

Change a Regular Withdrawal Plan

**OR**

Cancel a Regular Withdrawal Plan – Please complete the date field below.

Effective date  /  2 0

Regular withdrawal amount required \$  (minimum \$200)

Desired debit frequency  Monthly  Quarterly

### Please note:

- Complete Step 4 if you are establishing this facility or wishing to change the details of your nominated financial institution account into which the regular withdrawal payments are to be credited.
- Regular withdrawals may be delayed if there is insufficient cash in your Cash Account to meet the regular withdrawal amount.
- Regular withdrawals are paid out of your Cash Account on the 1st day of the month or the nearest business day after, according to the frequency you selected.

## Step 3: Automatic Distribution Facility – for automatic payment of accumulated income distributions

Establish an Automatic Distribution Facility

**OR**

Cancel an Automatic Distribution Facility

Desired debit frequency  Quarterly  Half yearly

### Please note:

- Complete Step 4 if you are establishing this facility or wishing to change the details of your nominated financial institution account into which the income distributions are to be credited.
- Accumulated income distributions from the Cash Account are withdrawn either quarterly or half-yearly and paid into your nominated account with your financial institution.
- Amounts less than \$200 will be held in your Cash Account until the next payment period.
- The Automatic Distribution Facility is run on the 20th day of the month (or the next business day) following the end of the relevant calendar quarter or half-year.

## Step 4: Financial institution details for Regular Withdrawal Plan and Automatic Distribution Facility

Please provide the details of your nominated account with your financial institution to have your regular withdrawals and/or income distributions paid to you.

### Financial institution

Name

Branch

Address

Account name

BSB  -  Account number

### Important note:

- The account name with the above financial institution must be the same as the name of the investment account.

## Step 5: Declaration

**Important note:** The Trustee collects the information in this form for the purpose of updating the information it holds about you. The information provided in this form will be managed in accordance with the Privacy Policy at [www.ioof.com.au/privacy](http://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/We consent to the collection and use of my/our information by the Trustee as specified.

I/We request the Service Operator, IOOF Investment Management Limited (IOOF) ABN 53 006 695 021 AFS Licence No. 230524, to make the changes in this form to my/our account.

I/We confirm that I/we received, read and understood the current Pursuit Select Investment Service Offer Document dated 1 July 2014 (Offer Document) (and any supplementary Offer Documents) and bound by its terms and conditions.

I/We understand that any directions which I/we have given here will override any similar directions I/we have previously given.

I/We declare that all details in this form are true and correct.

### Joint investors

If there are joint investors, both investors are required to sign below unless instructions to accept one signature have previously been given to IOOF in writing.

### Note for Power of Attorney

If this form is signed under a Power of Attorney, please enclose a certified copy of the Power of Attorney with this form. If signed under Power of Attorney, the attorney certifies that he/she has not received notice of revocation of that power.

### Note for corporate account holders

This application must be signed either:

- under common seal; and/or
- by two directors or a director and the company secretary; or
- by the sole director (where applicable) who is also the sole company secretary.

### Part A – Individual Investor or Joint Investors

Signatory 1	<div style="border: 1px solid black; height: 30px;"></div>	Date	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	/	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	/	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>
Full name	<div style="border: 1px solid black; height: 20px;"></div>						
Signatory 2 (if applicable)	<div style="border: 1px solid black; height: 30px;"></div>	Date	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	/	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	/	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>
Full name	<div style="border: 1px solid black; height: 20px;"></div>						

## Part B – Corporate Investor, Trust, Self Managed Superannuation Fund, Incorporated/Unincorporated Club/Body or Deceased Estate

Signatory 1		Date	□□	/	□□	/	□□□□
Title (such as Director/Sole Director/ Company Secretary/Trustee)							
Full name							
Signatory 2		Date	□□	/	□□	/	□□□□
Title (such as Director/Sole Director/ Company Secretary/Trustee)							
Full name							
Signatory 3 (for additional Trustees if applicable)		Date	□□	/	□□	/	□□□□
Title (if applicable)							
Full name							
Signatory 4 (for additional Trustees if applicable)		Date	□□	/	□□	/	□□□□
Title (if applicable)							
Full name							
Common seal (of company) if required							

Please sign and return this form to:

**Post** IOOF Pursuit, Reply Paid 264, Melbourne, VIC 8060

**Email** clientfirst@ioof.com.au

**Facsimile** 03 8614 4431

**Enquiries** 1800 913 118