

Investment Withdrawal Request Form



Australian Unity Investment Bonds

Please **PRINT** clearly in **BLACK or BLUE** pen keeping well within the boxes. Use crosses in the boxes marked with an "X".

1. Investor(s) Details

Title	<input checked="" type="checkbox"/> Mr	<input checked="" type="checkbox"/> Mrs	<input checked="" type="checkbox"/> Ms	<input checked="" type="checkbox"/> Miss	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"/>	
Name in full	<input type="text"/>															
Residential address (not a PO Box)	<input type="text"/>															
Suburb	<input type="text"/>												State	<input type="text"/>	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Country	<input type="text"/>										
Phone	<input type="text"/>					Mobile	<input type="text"/>									
Email	<input type="text"/>															

2. Investment Details

Plan/Policy number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Commencement date	<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 checked="" type="checkbox"/> Full Withdrawal (Interim rate of interest will apply if an investment option is fully withdrawn prior to bonus declaration) To view your investment interim rate please view online at australianunity.com.au/investment-bonds-performance																	
<input checked="" type="checkbox"/> Partial Withdrawal (minimum amount \$500)	Amount required \$	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

3. Financial Institution Account Details

Bank Name	<input type="text"/>					Branch	<input type="text"/>										
Branch Number (BSB)	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	Account Number	<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"/>	<input type="text"/>
Account name	<input type="text"/>																

Important information about your withdrawal:

We care about keeping your account safe so there are circumstances where we will need to contact you and verify your details before releasing your payment. These circumstances may include:

- The bank account you've nominated is different to the bank account recorded on your file
- Your signature doesn't match the signature recorded on your file
- We need to verify other details relating to your request.

4. Reason for Withdrawal

To help us better understand our customer's needs, we ask that you please indicate your reasons for withdrawal below.

<input checked="" type="checkbox"/> Purchase property/car	<input checked="" type="checkbox"/> Other purchase	<input checked="" type="checkbox"/> Payment of a debt
<input checked="" type="checkbox"/> Investment has reached maturity	<input checked="" type="checkbox"/> Income support/living expenses	
<input checked="" type="checkbox"/> Invest elsewhere - please specify	<input type="text"/>	

5. Notes

- If you are under 16 years of age, both parents or guardians are required to sign and identification is required.
- Minimum remaining balance is \$1,000 to keep your investment open. If your withdrawal takes your Plan below the minimum balance, we may treat your withdrawal request as a full withdrawal and credit you the full balance and close your Plan.
- For security reasons no third party bank credits will be issued.

6. Declaration and Signature(s)

In consideration of payment of the part of my Investment(s) specified in this request, I confirm that I waive all rights to further claims of the benefit of the part(s) of the Investments I am withdrawing.

Investor 1 signature

Name of Investor 1

Date / /

Investor 2 signature

Name of Investor 2

Date / /



Return by post

(together with any identification documents where relevant)

Australian Unity - Investment bonds, Reply Paid 89, Adelaide SA 5001

(no stamp required if mailed in Australia)

If posting from outside of Australia, please send to Head Office:


271 Spring Street, Melbourne VIC 3000




Email


enquiries@australianunity.com.au


Contact us

 Australian Unity
271 Spring Street, Melbourne VIC 3000


 australianunity.com.au/wealth


Investor Services

 enquiries@australianunity.com.au

 1300 1300 38

Adviser Services

 investmentbonds@australianunity.com.au

 1300 133 285