

Withdrawal Request Form

Platinum Investment Bond

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

1. Investor Details

Policy number

Name in full

Residential address (not a PO Box)

Suburb State

Postcode Country

Email

Mobile Phone

2. Investment Details

Withdraw funds: based on default investment options as specified in Step 4

3. Type of Withdrawal

Full withdrawal

Partial Withdrawal (Minimum Amount \$500) Amount required \$

4. Investment Fund Withdrawal Details

Option Code

Platinum Asia Fund \$ or %

Platinum International Fund \$ or %

TOTAL \$ or %

5. 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"/> <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.

6. To better understand our investor needs, please indicate reason for withdrawal below

<input type="checkbox"/> Purchase property	<input type="checkbox"/> Purchase car	<input type="checkbox"/> Purchase other	<input type="checkbox"/> Pay off debt	<input type="checkbox"/> Invest elsewhere
<input type="checkbox"/> Other (please specify)	<input type="text"/>			

7. 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 / /

Note: If under 16 years of age – both parents or guardians to sign and identification is required.

Return by email

Send completed form together with identification documents where relevant.

platinuminvestmentbond@australianunity.com.au

Contact us

Australian Unity
Investment Bonds
GPO Box 4397
Melbourne VIC 3001
australianunity.com.au/platinum

Investor Services

platinuminvestmentbond@australianunity.com.au
1800 670 638

Adviser Services

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1300 133 285