

Nomination of Beneficiary Form

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 Details

Policy Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
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. Declaration

I/We

holder/s of the above policy/ies, hereby revoke any nomination previously made by me/us in respect to the monies payable by the said Society at my/our death, and I/we hereby nominate the beneficiaries set out hereunder, to receive the said monies payable upon my/our death in accordance with the Fund Rules of the above Society.

Your personal information will be collected, used and disclosed by us in accordance with our Privacy Policy and in accordance with the law. You can obtain a copy of our Privacy Policy via our website australianunity.com.au/privacy-policy or by telephone 1300 1300 38.

3. Nomination of Beneficiaries

(Total proceeds must equal 100%)

Beneficiary 1

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"/>
Beneficiaries surname	<input type="text"/>		
Beneficiaries given name(s)	<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"/>
Relationship to sponsor	<input type="text"/>	% of Benefit	<input type="text"/> <input type="text"/> <input type="text"/> %

Beneficiary 2

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input 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"/>			
Beneficiaries surname	<input type="text"/>														
Beneficiaries given name(s)	<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"/>									
Relationship to sponsor	<input type="text"/>										% of Benefit	<input type="text"/>	<input type="text"/>	<input type="text"/>	%

Beneficiary 3

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input 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"/>			
Beneficiaries surname	<input type="text"/>														
Beneficiaries given name(s)	<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"/>									
Relationship to sponsor	<input type="text"/>										% of Benefit	<input type="text"/>	<input type="text"/>	<input type="text"/>	%

4. Signature(s)

All investor signatories must sign below:

Investor 1 signature

<input type="text"/>
Name of Investor 1
<input type="text"/>
<input type="text"/>
Date <input type="text"/>

Investor 2 signature

<input type="text"/>
Name of Investor 2
<input type="text"/>
<input type="text"/>
Date <input type="text"/>



Return by email

enquiries@australianunity.com.au



Post

(together with any identification documents where relevant)

Australian Unity - Investment Bonds, Reply Paid 93753 Melbourne VIC 8060
(no stamp required if mailed in Australia)

If posting from outside of Australia, please send to:
GPO Box 4397 Melbourne VIC 3001

Contact us

Australian Unity
GPO Box 4397 Melbourne VIC 3001
 australianunity.com.au/wealth

Investor Services

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 1300 1300 38

Adviser Services

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 1300 133 285