IOOF WEALTHBUILDER



Transfer of Ownership Form

For assistance please contact Investor Services on 1800 002 217

Please complete these instructions in **BLACK INK** using **CAPITAL LETTERS** (except for your email address) and **X** boxes where provided.

- All policy owners registered on the IOOF WealthBuilder policies (or accounts) listed for transfer need to complete this section.
- Upon registration of the transfer by AULBL, complete ownership of the IOOF WealthBuilder policy(ies) will be transferred from the current policy owner(s) to the new policy owner(s).
- If multiple policies/accounts are listed for transfer, the same policy owner(s) must be registered on each policy or account nominated for transfer. If the policy owner(s) registered for each account are different, then separate Transfer of Ownership Forms will be required.
- The transfer revokes any existing beneficiary nominations.
- The transfer revokes any existing investor advice fee (IAF) arrangements. IAFs (if required) will need to be re-negotiated/agreed between the new policy owner and adviser.
- Transfer of ownership does not automatically change the life insured(s). The existing life insured(s) will remain registered on the IOOF WealthBuilder account(s) following the transfer of ownership until we receive alternative instructions. Step 3 of this form can be completed to change the life insured to the new policy owner(s) or other person(s) as nominated by the new policy owner(s).
- Under a Child's Advancement Policy, the life insured (child) cannot be changed and transfer can only be made to a single policy owner.

Policies to be transferred List IOOF WealthBuilder account number(s) to be transferred to new investor/policy owners. IOOF WealthBuilder account numbers

Note: Where multiple accounts are to be transferred, the registered policy owners of all accounts listed must be the same.

Investor details			
Current investor 1			
Title	Dr Mr Mrs Ms Miss Sur	name	
Given name(s)			
Residential address			
Suburb		State	Postcode
Mailing address			
Suburb		State	Postcode
Date of birth	DD/MM/YYYY		



Current investor 2 (if	applicable)						
Title	X Dr X	Mr Mrs Ms Miss	s Surname				
Given name(s)							
Date of birth	D D/	MM/YYYY					
Current investor 3 (if	applicable)						
Title	X Dr X	Mr Mrs Ms Ms Miss	S Surname				
Given name(s)							
Date of birth	DD/	MM/YYYY					
If the policy(ies) are re	egistered in	the name of an entity (such a	s a company or trust), please inc	lude the name of the entity:			
Power of Attorney	r ¹						
To be completed if a P	Power of Atto	orney is acting on behalf of the	e current policy owner(s).				
Title	X Dr X	Mr Mrs Ms Miss	s Surname				
Given name(s)							
Attorney document as Laundering and Count	s well as the er-Terrorism his docume	appropriate proof of identifica Financing Act 2006 (AML/CT) nt can be obtained by calling I	AULBL, we will require a certified attion documents in accordance we Fact). Please refer to the 'Complenvestor Services on 1800 002 217	ith the Anti- Money eting Proof of Identity' for			
Step 2: New policy	y owner de	etails (to be completed by the	new policy owner(s))				
• •	• •	to complete certain sections ompleted by the new policy ov	•	m depending on their investor type.			
Complete Part A if yo	ou are:	Complete Part B if you are:	Complete Part C if you are:	Complete Part b (a), (b) and (h) only if you are:			
an individual inv	vestor ² OR	X a company	X a trust ³	X other investor⁴			
X joint investor				then go straight to Step 3.			
			Note: New policy owners from this category will also need to complete the relevant FSC Identification form. For a copy of the applicable form, please contact Investor Services on 1800 002 217				
Nata Namina	/m ali av · · · ·	ow(o)lo o do nost la al al ances ' ' '	and inscretion and in an ALILDI.	at will be seen in all to see the con-			
		er(s) who do not hold an existi ed under the AML/CTF legislat		ct will be required to provide proof			
			BL products will not be required applying under a different name to				

- 1. As previously nominated in writing and accepted by AULBL as authority to act on the IOOF WealthBuilder account(s) listed in Step 1.
- 2. Individual investors include individuals acting for themselves or as sole traders.
- 3. Trusts may include managed investment schemes, or other trusts such as family or charitable trusts or deceased estates.
- 4. Other investors may include partnerships, associations (such as incorporated, unincorporated club or body), registered co-operatives or government entities.

(such as joint investors or in a family company name) or in a different capacity to their existing accounts (such as trustee

for a trust or director of a company).



PART A - Individual or joint investors Investor 1 (all notices and correspondence will be forwarded to the address of Investor 1) Title X Mr X Mrs X Ms Miss Surname Given name(s) This section must be completed. Note: PO Box can only be provided under 'Mailing address'. Residential address Suburb State Postcode Country Mailing address (if different from above) Suburb State Postcode Phone Mobile Email Date of birth Gender Male Female Occupation Industry of occupation Is the new investor a child between 10 and 16 years? Yes (If yes, please attach written consent of parent or guardian) Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates. Are you a politically exposed person? Yes No (If 'yes', complete the Politically Exposed Persons Form on our website) Are you residing overseas? Yes No (If 'yes', complete an Overseas Investor Form on our website) No Are you a tax resident of Australia? Yes

Please answer both tax residency questions as you can be a tax resident of more than one country. If you are only a tax resident of Australia and no other country please proceed to 'Investor 2'.

No

Yes

Are you a tax resident of another country?



FOREIGN RESIDENTS ONLY - Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS)

Under FATCA and CRS laws, we are required to ask all investors to provide additional information about their tax residency. Tax residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. This information will be reported to the relevant tax authority with Australia and internationally.

For all countries where you are a tax resident please provide a TIN (Tax Identification Number) which is the number assigned by each country for the purposes of administering tax laws such as a Social Security Number in the US. If a TIN cannot be provided, please list one of the three reasons specified below (A, B or C) for not providing a TIN.

Country			TIN					Reason fo	or no T	'IN (A,E	or C)#
#Reasons for not prov	iding a TIN										
Reason A – The count	_	oes not iss	ue TIN	s to tax residents	, OR						
Reason B – You have r	not been issued with	a TIN, OR									
Reason C – The count	ry of tax residency d	oes not rec	quire th	e TIN to be disclo	sed.						
Investor 2 (for joint inv	restors only*)										
Title	X Dr X Mr X N	√lrs X M	s XI	Miss Surname [
Given name(s)											
This section must be o	completed. Note: PO	Box can or	nly be p	provided under 'Ma	ailing add	lress'.					
Residential address											
Suburb					State			Postcode			
Country											
Mailing address (if different from above)											
Suburb					State			Postcode			
Phone											
Mobile											
Email											
Date of birth	DD/MM	/ Y Y	Υ	Υ			Gende	er X Ma	ıle	X	emale
Occupation											
Industry of occupation											
Is the new investor a c	hild between 10 and	16 years?									
X Yes (If yes, please a	ttach written consent o	of parent or	guardia	n)							
X No											
Politically exposed persorganisation, either with											
Are you a politically exp	posed person?	X Yes	X	No (If 'yes', complet	te the Polit	tically Exp	osed Pe	ersons Form	on our	websit	e)
Are you residing overse	eas?	X Yes	X	No (If 'yes', comple	te an Over	seas Inve	stor Fori	m on our wel	osite)		
Are you a tax resident	of Australia?	X Yes	X	No							
Are you a tax resident	of another country?	X Yes	X	No							



Reason for no TIN (A,B or C)#

Please answer both tax residency questions as you can be a tax resident of more than one country. If you are only a tax resident of Australia and no other country please proceed to 'Investor 3'.

FOREIGN RESIDENTS ONLY - Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS)

Under FATCA and CRS laws, we are required to ask all investors to provide additional information about their tax residency. Tax residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. This information will be reported to the relevant tax authority with Australia and internationally.

For all countries where you are a tax resident please provide a TIN (Tax Identification Number) which is the number assigned by each country for the purposes of administering tax laws such as a Social Security Number in the US. If a TIN cannot be provided, please list one of the three reasons specified below (A, B or C) for not providing a TIN.

TIN

-	
#Reasons for not provi	iding a TIN
	ry of tax residency does not issue TINs to tax residents, OR
Reason B – You have r	not been issued with a TIN, OR
Reason C – The country	ry of tax residency does not require the TIN to be disclosed.
Investor 3 (for joint inv	estors only*)
Title	X Dr X Mr X Mrs X Ms X Miss Surname
Given name(s)	
This section must be c	ompleted. Note: PO Box can only be provided under 'Mailing address'.
Residential address	
Suburb	State Postcode Postcode
Country	
Mailing address (if different from above)	
Suburb	State Postcode Postcode
Phone	
Mobile	
Email	
Date of birth	DD/MM/YYYY Gender X Male X Female
Occupation	
Industry of occupation	
Is the new investor a ch	nild between 10 and 16 years?
Yes (If yes, please a	ttach written consent of parent or guardian)
X No	

Country



lf different from resider Suburb				State	Postcode
If different from resider					
	ntial address above	e. PO Box no	t accepted.		
Business address					
Australian Business Number (ABN)					
Business name (if applicable)					
	ng Investor 1 , pleas	se also comp	olete this section if you	are an individual inves	stor applying as a sole trader:
For Sole Traders only					
			perate the account and drawals) please tick this		nvestor(s) for future transactions
Reason C – The counti	y or tax residency	uoes not req	ulle the This to be discit	oseu.	
Reason B – You have n			uire the TIN to be disclo	osod.	
	-		ue TINs to tax residents	s, OR	
*Reasons for not provi	•	dooo not ioo	uo TINo to tov rocidents	OD	
Country		-	TIN		Reason for no TIN (A,B or C)
			A, B or C) for not providir		
					ch is the number assigned by IS. If a TIN cannot be provided,
Tax residency rules diff	er by country. Whe a person spends ir	ether an indiv n a country, t	ridual is a tax resident on the location of a person'	f a particular country	bout their tax residency. is often (but not always) based of work. This information will be
	_		-	-	orting Standard (CRS)
			can be a tax resident of For sole traders only'.	more than one counti	ry. If you are only a tax resident
Are you a tax resident c	of another country?	Yes Yes	X No		
Are you a tax resident o		X Yes	X No		
Are you residing overse		X Yes	No (If 'yes', comple	ete an Overseas Investor	Form on our website)
	·				ed Persons Form on our website)
Are you a politically exp	osea person?	X Yes	I V I INO (It 'Voo' comple		



Part B - Companies or other investors If you are investing as a: **Domestic Company,** please complete all applicable sections of **Step 2** including the relevant FSC/FPA Identification form(s) for an Australian Company and their beneficial owners (if you have a financial adviser) or an Additional Tax Information Form (if you do not have a financial adviser) as applicable to you. Foreign Company (domiciled in Australia), please complete all applicable sections of Step 2, including the relevant FSC/FPA Identification form(s) for a Foreign Company and their beneficial owners (if you have a financial adviser) or an Additional Tax Information Form (if you do not have a financial adviser) as applicable to you. Other Investor5, please complete subsections (a), (b) and (h) only (below). You will also need to complete the relevant FSC/ FPA Identification form(s) (if you have a financial adviser), or an Additional Tax information Form (if you do not have a financial adviser) relevant to your investor type. For a copy of the relevant form, please contact Investor Services on 1800 002 217 or visit australianunity.com.au/aulbl-wealthbuilder (a) Company/entity details Registered name of company/entity Australian Company OR Number (ACN) Australian Registered OR Body Number (ARBN) (if applicable) Foreign registration number (if unregistered in Australia) Registered business address Postcode Suburb State Country (if applicable) Principal business address (if different from above) Postcode Suburb State Country (if applicable) Industry in which company operates (b) Please list full names of directors/officeholders/partners (as applicable) Director/office holder/partner 1 Title Dr Mr Mrs Ms Miss Surname Given name(s) Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates. Are you a politically exposed person? No (If 'yes', complete the Politically Exposed Persons Form on our website) Yes

5. Other investors may include partnerships, associations (such as incorporated/unincorporated club/body), registered co-operatives, government entities.

No (If 'yes', complete an Overseas Investor Form on our website)

Are you residing overseas?



Director/office holder	/partner 2
Title	To the total control of the to
Given name(s)	
	sons are individuals who occupy a prominent public position or function in a government body or international hin or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically ex	posed person? Yes No (If 'yes', complete the Politically Exposed Persons Form on our website)
Are you residing overse	eas? Yes X No (If 'yes', complete an Overseas Investor Form on our website)
Director/office holder	/partner 3
Title	X Dr X Mr X Mrs X Ms X Miss Surname
Given name(s)	
	sons are individuals who occupy a prominent public position or function in a government body or international hin or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically ex	posed person? Yes No (If 'yes', complete the Politically Exposed Persons Form on our website)
Are you residing overse	eas? Yes X No (If 'yes', complete an Overseas Investor Form on our website)
Director/office holder	/partner 4
Title	X Dr X Mr X Mrs X Ms X Miss Surname
Given name(s)	
	sons are individuals who occupy a prominent public position or function in a government body or international hin or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically ex	posed person? X Yes X No (If 'yes', complete the Politically Exposed Persons Form on our website)
Are you residing overse	eas? Yes No (If 'yes', complete an Overseas Investor Form on our website)
(c) Is the company re	egulated?
X Yes	If yes, please specify regulator:
Regulator (such as ASIC, APRA)	
Licence number	
X No	If no, go to sub-section (d)
(d) Is the company li	sted with the ASX?
X Yes	
X No	
(e) Is the company a	majority owned subsidiary of a listed company?
X Yes	If yes, please provide name of the listed company:
Listed company name	
X No	If no, go to sub-section (f)



(f) Company type											
X Public											
Private/Proprietary	If a proprietary cor	mpany, comple	ete sub-sectio	n (g) below.							
(g) Beneficial owners	ship										
Please list full names a To be completed for pro a listed company. Proceed to sub-section	oprietary compar	nies or if the c	ompany is n	ot regulated,							sidiary of
Shareholder/beneficia	al owner 1										
Title	X Dr X Mr X	Mrs M	s X Miss	Surname							
Given name(s)											
Residential address (Note: PO Box not accepted)											
Suburb					State			Postcode			
Country of residence											
Politically exposed pers organisation, either with											
Are you a politically exp	osed person?	X Yes	X No (If	'yes', complete	e the Polit	ically Exp	osed F	Persons Form	on ou	ır webs	site)
Are you residing overse	eas?	X Yes	X No (If	'yes', complet	e an Overs	seas Inve	stor Fo	orm on our web	osite)		
Shareholder/beneficia	al owner 2										
Title	X Dr X Mr X	Mrs M	s X Miss	Surname							
Given name(s)											
Residential address (Note: PO Box not accepted)											
Suburb					State			Postcode			
Country of residence											
Politically exposed pers organisation, either with											
Are you a politically exp	oosed person?	X Yes	X No (If	'yes', complete	e the Polit	ically Exp	osed F	Persons Form	on ou	ır webi	ıste)
Are you residing overse	eas?	X Yes	X No (If	'yes', complet	e an Overs	seas Inve	stor Fo	orm on our web	oiste)		



Shareholder/beneficial owner 3

Title	X Dr X Mr X	Mrs X Ms	Miss	Surname								
Given name(s)												
Residential address (Note: PO Box not accepted)												
Suburb					State			Postcode				
Country of residence												
Politically exposed persorganisation, either with												
Are you a politically exp	posed person?	X Yes	X No (If	yes', complete	e the Polit	tically E	xposed l	Persons Form	on ol	ır web	iste)	
Are you residing overse	eas?	X Yes	X No (If	yes', complete	e an Over	seas In\	estor Fo	orm on our web	oiste)			
Shareholder/beneficia	al owner 4			_								
Title	X Dr X Mr X	Mrs X Ms	Miss	Surname								
Given name(s)												
Residential address (Note: PO Box not accepted)												
Suburb					State			Postcode				
Country of residence												
Politically exposed persorganisation, either with												
Are you a politically exp	posed person?	X Yes	X No (If	yes', complete	e the Polit	tically E	xposed l	Persons Form	on ol	ır web	oiste)	
Are you residing overse	eas?	X Yes	No (If	yes', complete	e an Over	seas In\	estor Fo	orm on our web	oiste)			
(h) Other beneficial o	owners											
To be completed if ther	re are no individua	ls who meet t	he requirem	ent of sub-s	ection (g	g)						
Please provide full deta	ails of individuals w	who directly o	indirectly c	ontrol the co	mpany.							
This includes exercising control through the capacity to determine decisions about financial or operating policies, or by means of trusts, agreements, arrangements, understanding & practices, voting rights of 25% or more, or power of veto. If no such person can be identified then the most senior managing official/s of the company (such as the managing director or directors who are authorised to sign on the company's behalf).												
Other beneficial owne	er 1											
Title	X Dr X Mr X	Mrs X Ms	Miss	Surname								
Given name(s)												
Residential address (Note: PO Box not accepted)												
Suburb					State			Postcode				
Country of residence					·			·	=			
Politically exposed persorganisation, either with												
Are you a politically exp	posed person?	X Yes	X No (If	yes', complete	e the Polit	tically E	xposed l	Persons Form	on ol	ır web	site)	
Are you residing overse	eas?	X Yes	X No (If	yes', complete	e an Over	seas Inv	estor Fo	orm on our web	osite)			



(h) Other beneficial o	owners
Other beneficial owne	r 2
Title	Dr X Mr X Mrs X Ms X Miss Surname
Given name(s)	
Residential address (Note: PO Box not accepted)	
Suburb	State Postcode Postcode
Country of residence	
	cons are individuals who occupy a prominent public position or function in a government body or international nin or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically exp	posed person? Yes No (If 'yes', complete the Politically Exposed Persons Form on our website)
Are you residing overse	eas? Yes No (If 'yes', complete an Overseas Investor Form on our website)
If you are applying as a form, and a separate for do not have a financial	residency requirements company, and have a financial adviser, please ensure you complete the relevant FSC/FPA Identification form for individuals who are beneficial owners (as applicable), or, an Additional Tax Information Form if you adviser. To obtain a copy of the relevant form(s) or if your details change at any time please contact Investor 217 or visit australianunity.com.au/aulbl-wealthbuilder
(i) Contact person	
A contact person must	be nominated for the account.
Title	X Dr X Mr X Mrs X Ms X Miss Surname
Given name(s)	
Mailing address	
Suburb	State Postcode Postcode
Country	
Phone	
Mobile	
Email	
Date of birth	D D / M M / Y Y Y Y Gender Male X Female X
The contact personIf the contact persor 'Representative facil	d correspondence will be forwarded to the contact person . must be one of the signatories on the account. n is intended to have authority to transact on the account, on behalf of the company/entity, Step 6 ity' must be completed. Conditions applying to the appointment of a representative are detailed in the IOOF act Disclosure Statements (PDS) and any Supplementary Product Disclosure Statements (SPDS).
Part C Trusts (trust v	vith a corporate trustee or individual trustees)
a) Full name of the tru	st
(b) Full business name	e (if any) of the trustee in respect of the trust
(c) Country of establis	hment of trust



(d) Type of trust (tick a	all that apply)
X Other trust type	(such as family, charitable, deceased estate)
Please specify	
X Managed investi	ment scheme
X Registered	(provide ARSN if registered)
OR	
X Unregistere	ed
X Unregulated True	st For unregulated Trusts please list the person(s) who settles the initial sum or assets to create the Trust.
Full name of sett	lor(s)
Note for tweeters	
Note for trustees:	rporate trustee, complete subsection (e)-i below and subsection (f), if applicable.
	ridual trustees, please complete subsection (e)-ii and subsection (f), if applicable.
	nt identification is required under AML/CTF legislation. To obtain a copy of the relevant 'FSC Identification
form – for a Regulat	ed or Unregulated Trust', as applicable, please contact Investor Services on 1800 002 217.
· All trustees must	sign the applicant declaration in Step 8.
	(s)/contact person (complete either i - Corporate trustee OR ii - Individual trustee(s) only)
i – Corporate trustee	
Company name	
Contact person ⁶	
Title	Dr Mr Mrs Ms Surname
Given name(s)	
Mailing address	
Suburb	State Postcode Postcode
Country	
Phone	
Mobile	
Email	
Date of birth	D D / M M / Y Y Y Y Gender Male X Female X



ii - Individual trustee(s)

Please list all trustee(s), including name(s) and address(es):

Trustee 16	
Title	Or Mr Mrs Ms Ms Surname
Given name(s)	
This section must be c	mpleted. Note: PO Box can only be provided under 'Mailing address'.
Residential address	
Suburb	State Postcode Postcode
Mailing address (if different from above)	
Suburb	State Postcode Postcode
Country	
Phone	
Mobile	
Email	
Date of birth	D / M M / Y Y Y Y Gender Male X Female X
Occupation	
Industry Occupation	
	ns are individuals who occupy a prominent public position or function in a government body or international or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically exp	sed person? X Yes X No (If 'yes', complete the Politically Exposed Persons Form on our website)
Are you residing overse	s? Yes No (If 'yes', complete an Overseas Investor Form on our website)
Trustee 2	
Title	Or Mr Mrs Ms Ms Surname
Given name(s)	
Residential address (Note: PO Box not accepted)	
Suburb	State Postcode Postcode
Country	
	ns are individuals who occupy a prominent public position or function in a government body or international or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically exp	sed person? X Yes X No (If 'yes', complete the Politically Exposed Persons Form on our website)
Are you residing overse	s? Yes X No (If 'yes', complete an Overseas Investor Form on our website)

^{6.} All future notices and correspondence will be sent to the identified trustee (trustee 1 for individual trustees) or the contact person (corporate trustee). The identified trustee or the contact person must be a signatory on the account. If the identified trustee or the contact person is intended to have authority to transact on the account on behalf of all trustees/signatories, the 'Nomination of Representative Facility' form must be completed. Conditions applying to the appointment of a representative as detailed in the PDS (and any SPDS).



Trustee 3 Title Mr Mrs Ms Miss Surname Given name(s) Residential address (Note: PO Box not accepted) Suburb State Postcode Country Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates. Are you a politically exposed person? No (If 'yes', complete the Politically Exposed Persons Form at on our website) Yes Are you residing overseas? No (If 'yes', complete an Overseas Investor Form on our website) **Trustee 4** Title Dr Mr Mrs Ms Miss Surname Given name(s) Residential address (Note: PO Box not accepted) Suburb State Postcode Country Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates. Are you a politically exposed person? No (If 'yes', complete the Politically Exposed Persons Form on our website) Yes Are you residing overseas? Yes No (If 'yes', complete an Overseas Investor Form on our website) (f) Beneficiary details of trust - to be completed only if 'Other trust type' was selected in subsection (d). Do the terms of the trust identify the beneficiaries by reference to membership of a class? If yes, please provide details of the beneficiary membership class(es) (such as unit holders, family members Yes of named person or charitable purpose). Class of membership Class of membership Class of membership

Class of membership

No

If no, please provide the following beneficiary details:



Beneficiary 1	
·	
Title	X Dr X Mrs X Ms X Miss Surname
Given name(s)	
Residential address (Note: PO Box not accepted)	
Suburb	*State *Postcode *Postcode
Country	
Are you a politically exp	posed person? Yes No (If 'yes', complete the Politically Exposed Persons Form on our website)
Are you residing overse	eas? Yes X No (If 'yes', complete an Overseas Investor Form on our website)
Beneficiary 2	
Title	Dr Mr Mrs Ms Miss Surname
Given name(s)	
Residential address	
(Note: PO Box not accepted) Suburb	*State *Postcode
Country	
Politically exposed pers	cons are individuals who occupy a prominent public position or function in a government body or international nin or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically exp	
Are you residing overse	eas? Yes No (If 'yes', complete an Overseas Investor Form on our website)
Beneficiary 3	
Title	X Dr X Mr X Mrs X Ms X Miss Surname
Given name(s)	
Residential address (Note: PO Box not accepted)	
Suburb	*State *Postcode
Country	
	cons are individuals who occupy a prominent public position or function in a government body or international nin or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically exp	posed person? X Yes X No (If 'yes', complete the Politically Exposed Persons Form on our website)
Are you residing overse	eas? Yes X No (If 'yes', complete an Overseas Investor Form on our website)
Beneficiary 4	
Title	X Dr X Mrs X Miss Surname
Given name(s)	
Residential address (Note: PO Box not accepted)	
Suburb	*State *Postcode *Postcode
Country	
	cons are individuals who occupy a prominent public position or function in a government body or international nin or outside Australia. This definition also extends to their immediate family members and close associates.
Are you a politically exp	

No (If 'yes', complete an Overseas Investor Form on our website)

Yes

Are you residing overseas?



(g) Beneficial owners – to be completed for unregulated Trusts										
Please confirm the Trustees listed in sub-section (e) ii are beneficial owner(s) of the Trust.										
This includes control by acting as Trustee; or by means of trusts, agreements, arrangements, understandings and practices; or exercising control through the capacity to direct the Trustees; or the ability to appoint or remove the Trustees.										
Trustee 1		X Yes	X No							
Trustee 2		X Yes	X No							
Trustee 3		X Yes	X No							
Please also provide full	details of other	er individuals who	o directly or	indirectly o	control the	Trust.				
Other beneficial owner	r 1									
Title	X Dr X Mr	Mrs X Ms	s X Miss	Surname						
Given name(s)										
Residential address Note: PO Box not accepted)										
Suburb					*State		*Postcode			
Country										
Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates.										
Are you a politically exposed person? X Yes X No (If 'yes', complete the Politically Exposed Persons Form on our website)										
Are you residing overseas? Xes Xes No (If 'yes', complete an Overseas Investor Form on our website)										
Other beneficial owner	r 2									
Title	X Dr X Mr	Mrs Ms	s X Miss	Surname						
Given name(s)										
Residential address (Note: PO Box not accepted)										
Suburb					*State		*Postcode			
Country										
Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates.										
Are you a politically exposed person? X Yes X No (If 'yes', complete the Politically Exposed Persons Form on our website)										
Are you residing overseas? Yes No (If 'yes', complete an Overseas Investor Form on our website)										

Identification and tax residency requirements

If you are applying as a company, and have a financial adviser, please ensure you complete the relevant FSC/FPA Identification form, and a separate form for individuals who are beneficial owners (as applicable), or, an Additional Tax Information Form if you do not have a financial adviser. To obtain a copy of the relevant form(s) or if your details change at any time please contact Investor Services on 1800 002 217 or visit australianunity.com.au/aulbl-wealthbuilder

IOOF Portfolio Online registration: To register for IOOF Portfolio Online, please complete the online application form via the Portal on our website. You can only register for this service after you have received an investor number.



Step 3: Change of life insured⁷ (for completion by new policy owner(s))

This section must be completed to update the life insured(s) details on the WealthBuilder account(s) listed in Step 1 upon transfer to the new policy owner(s).

Please note:

This is a request to (select a box):

• If the account(s) listed are set up as Child's Advancement Policies, the existing life insured (child) cannot be changed. Please tick the applicable boxes depending on your type of instruction and complete the relevant Steps as indicated.

X keep existing nomin	ated life insured(s) (all Child's Advancement Policies will automatically carry over)8
OR	
X replace the existing	life insured(s) with the new life insured(s) detailed below ⁸
OR	
add the following ac	Iditional life insured to the existing life insured(s) registered on the WealthBuilder account(s)8.
Life insured 1	
Title	X Dr X Mr X Mrs X Ms X Miss Surname
Given name(s)	
Mailing address	
Suburb	State Postcode Postcode
Phone	
Email	
Date of birth	DD/MM/YYYYY Gender Male X Female X
1. f. 10 /:f	
Life insured 2 (if applied	
Title	X Dr X Mr X Mrs X Ms X Miss Surname
Given name(s)	
Mailing address	
Suburb	State Postcode Postcode
Phone	
Email	
Date of birth	DD/MM/YYYYY Gender Male X Female X

^{7.} This section is not applicable for accounts set up as a Child's Advancement Policy.

^{8.} The life insured(s) will be applied to all accounts listed in Step 1.



Step 4: Proof of identity requirements (for completion by new policy owner(s) if applicable)

In accordance with the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act), your application cannot be processed unless this section is completed and you may be requested to provide additional information and documentation to facilitate AULBL compliance with AML/CTF legislation). AML/CTF legislation obligates AULBL to verify the identity of each of its investors before providing financial services to them.

Please note, generally investors who hold an existing investment in other AULBL products do not need to provide the proof of identity listed below.

Individual investors

If you will be the new policy owner(s) of the IOOF WealthBuilder account(s) listed in Step 1 and you do not hold an existing AULBL product, you will need to provide originals or original **certified copies** of one or more of the following documents. The proof of identity documents are required to be submitted with your Transfer of Ownership Form..

Type of investor (please X appropriate box)	Proof of identity – please provide the relevant document(s)
(a) Individuals acting for themselves	Either one of the following Acceptable Primary Photographic ID documents:
Note, for joint investors, the necessary proof of identity is required for each investor. OR	 Current driver's licence (issued under Australian State/Territory, or a foreign country equivalent, containing a photograph of the individual). Please copy front and back of licence.
Individuals acting as a sole trader	 Australian passport (an Australian passport that has expired within the preceding 2 years is acceptable).
	 Foreign passport or an international travel document issued by a foreign government, the United Nations (UN) or an agency of the UN, containing a photograph and signature of the person whose name the document is issued*.
	 Card issued under Australian State or Territory law for the purposes of providing a person's age containing a photograph.
	 A National Identity Card issued by a foreign government, the UN or an agency of the UN, containing a photograph and signature of the person whose name the card is issued*.
	OR (Acceptable Secondary ID documents):
	 A notice issued to an individual (showing the current residential address such as a tax notice within last 12 months or a utilities bill within last 3 months) that contains their residential address and records the provision of financial benefits/services or the debt owed by the individual.
	AND one of the following documents:
	Birth certificate or birth extract issued under Australian State/Territory.
	 Birth certificate issued by a foreign government, the UN or an agency of the UN.
	• Citizenship certificate issued by the Commonwealth.
	Citizenship certificate issued by a foreign government.
	 A concession (health or pension) card issued by the Department of Human Services or Centrelink.
(b) Individuals who have been nominated as a Representative	Either one of the following documents:
or Power of Attorney	 For verification of the identity of a nominated representative or Power of Attorney, refer to the proof of identity requirements listed in Section (a) above.
	Please note:
	 Where a Power of Attorney has been granted, a certified copy of the Power of Attorney must be provided.

^{*}Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

Who can certify your documents?

The 'Completing Proof of Identity' document provides a list of persons authorised to certify copies of original documents. To obtain a copy please contact one of Investor Services on 1800 002 217. Alternatively, you can download a copy at australianunity.com.au/aulbl-wealthbuilder



All non-individual investor applicants (eg companies or partnerships and other types of investors)

When completing the relevant FSC/FPA Identification form(s), the identification requirements are included in these forms (if you have a financial adviser). An Additional Tax Information Form must be completed if you do not have a financial adviser. As a guide you can refer to the proof of identity requirements included in the 'Completing Proof of Identity' document. To obtain a copy please contact Investor Services on 1800 002 217. Alternatively, you can download a copy from australianunity.com.au/aulbl-wealthbuilder Additional proof of identity is also required.

Step 5: Financial adviser details (financial adviser to complete, if applicable)

We will only register a financial adviser who:

• holds a current Australian Financial Services (AFS) Licence

 is an authorised representation 	esentative of a current AFS Licensee.
Financial adviser deta	ails
Dealer group	
License name	
Financial adviser name	
Financial adviser number	AFS licence number
If you are a new financ	cial adviser* please also complete the following details:
Business name	
Business address	
Suburb	State Postcode Postcode
Mailing address (if different from above)	
Suburb	State Postcode Postcode
*An email notifying you o	of your new financial adviser number will be forwarded to your office shortly after receipt of this application.
Declaration by financ	ial adviser
In submitting this appl	ication form:
• I declare that I hold a a holder of a current.	current AFS Licence OR I am a representative or an authorised representative nominated to act on behalf of AFS Licence
• I confirm that I have p PDS (and any SPDS)	provided the applicant with all the necessary information concerning their chosen investment, including the
• I consent to provide A (pursuant to the AML	AULBL access to all proof of identification records for the purposes of this application if requested _/CTF Act Part 7.2)
• I confirm that I have and:	conducted the relevant customer identification procedure in line with the obligations under the AML/CTF Act,
I have attached a application form	a certified copy of the applicant's identification document(s) for an individual/sole trader with this
Please note, this	is compulsory where:
 initial contribution 	ion is equal to or more than \$2 million, or
 the applicant is 	a Politically Exposed Person, or
	not residing in Australia.
OR	
I have completed	d and signed the relevant FSC/FPA identification form(s), which is attached to this Application

I have sighted and retained a certified copy of the applicant's identification document(s) recorded in the following

OR

(and retained a certified copy of the applicant's identification document(s))

'Record of proof of identity' table (please complete the table and declaration below).



Record of proof of identity (ID) [^]	ID document 1	ID document 2
Verified from	Original Certified copy	Original Certified copy
Document issuer		
Issue date	DD/MM/YYYY	DD/MM/YYYY
Expiry date	DD/MM/YYYY	DD/MM/YYYY
Document number		
Accredited English translation	X N/A Sighted	X N/A Sighted
Record of proof of identity (ID)^	ID document 3	ID document 4
Verified from	✓ Original	Original Certified copy
Document issuer		
Issue date	DD/MM/YYYY	DD/MM/YYYY
Expiry date	DD/MM/YYYY	DD/MM/YYYY
Document number		
Accredited English translation	X N/A Sighted	X N/A Sighted
Record of proof of identity (ID)^	ID document 5	ID document 6
Verified from	✓ Original	Original Certified copy
Document issuer		
Issue date	DD/MM/YYYY	DD/MM/YYYY
Expiry date	DD/MM/YYYY	DD/MM/YYYY
Document number		
Accredited English translation	X N/A Sighted	N/A Sighted
	identity which can be attached or verified and reta nunity.com.au/aulbl-wealthbuilder. This documen	
Signature	Dealer stamp	
X		
Date		
DD/MM/YYYY		

For assistance please contact Investor Services on 1800 002 217



Investor advice fees (optional) for completion by new policy owner and their financial adviser if applicable

All existing investor advice fees (IAFs) in place prior to the transfer of ownership will be automatically revoked on transfer to the new policy owner(s).

If you have agreed with your financial adviser to have IAFs deducted from the investment account(s) listed in Step 1^ please complete this section.

AULBL facilitates the payment of investor advice fees (IAFs) by deducting them from your account and paying them to your financial adviser directly.

AULBL, as issuer of IOOF WealthBuilder, is required to obtain specific written consent before a fee for financial advice can be deducted from your account. You are not under any obligation to consent to the fee being deducted.

You may alter your fees or revoke your consent at any time by contacting AULBL. Once your consent is revoked, no further fees will be deducted from your account, however any amount paid before you revoke your consent will not be automatically refunded. I/we confirm that I/we have agreed with my/our financial adviser to have the following IAFs deducted:

I/we confirm that I/we have agreed with my/our financial adviser to have the following IAFs deducted:

IAF – upfront
% (maximum of 3.00% inclusive of GST)
To be applied to your initial contribution only.
Please complete Standing IAF – upfront if you would like to apply the same rate or to nominate a different rate to be applied to future additional contributions.
Standing IAF – upfront
For nomination of a standing IAF – upfront for future additional contributions.
% (maximum of 3.00% inclusive of GST)
To be applied to additional contributions received unless individually instructed otherwise on receipt of each contribution.
Your adviser has estimated a fee of \$
for the 12 months^ commencing DD/MM/YYYY will be deducted from your account.
IAF – ongoing
either % pa (inclusive of GST) OR \$ (inclusive of GST)
Note: both % and \$ cannot be nominated.
To be deducted from my/our account:
monthly quarterly half yearly commencing from* 0 1 / M M / Y Y Y Y *The date from which the IAF - ongoing will be calculated. The IAF - ongoing will generally be deducted on the first day of the month following the end of the nominated frequency.
Your adviser has estimated a fee of \$
for the 12 months^ commencing DD/MM/YYYY will be deducted from your account.
Consent expiry date (required)
Where I have chosen IAF – standing upfront and/or IAF – ongoing, I understand the consent for IOOF to pay the ongoing fee to my adviser
will cease on DD/MM/YYYY which is 150 days after the anniversary date for an ongoing fee arrangement.
IAF – one-off
\$ (inclusive of GST)
to be deducted from my/our account on 0 1 / M M / Y Y Y

^{*}The date from which the IAF - ongoing will be calculated. The IAF - ongoing will generally be deducted on the first day of the month following the end of the nominated frequency. ^or less if you have a fixed term advice agreement.



Please note:

- · IAFs are not fees associated with AULBL. They are separately negotiated between you and your financial adviser for the provision of advice and services.
- You may alter or cancel IAFs at any time by writing to us.
- · IAFs may not be deducted on the 1st of the nominated month in certain circumstances, for example, if there are insufficient funds where switches or withdrawals are pending.
- · Asset (percentage) based IAFs are not permitted for accounts established with borrowed funds.
- Upon transfer of policy ownership, or a change of adviser, existing IAF arrangements will be cancelled and will need to be re-negotiated/agreed between the new policy owner/adviser.

Step 6: Representative facility (optional) (for completion by new policy owner(s) if applicable)

	ation of the transfer of ownership of the IOOF WealthBuilder account(s) to the new policy owner(s), any existing or Power of Attorney nominated to act on behalf of the existing policy owner(s) will be automatically revoked.				
For new policy owner(s) – do you wish to nominate a representative on your WealthBuilder account?					
X Yes	Please complete the section below				
X No	Go to Step 7				
Power of Atto	ion is signed under a Power of Attorney, you do not need to complete this section.				
if you wish to h	ominate a representative please complete all sections below.				
Nomination of	representative				
I/We nominate	I/We nominate the following person as my/our representative:				
Title	X Dr X Mr X Mrs X Ms X Miss Surname				
Given name(s)					
This section mu	ust be completed. Note: PO Box can only be provided under 'Mailing address'.				
Residential add	ress				
Suburb	State Postcode Postcode				
Mailing address					
Suburb	State Postcode Postcode				
Phone					

Proof of identity is required for all nominated representatives.

Please ensure the required proof of identity documents are included with this Transfer of Ownership Form, as detailed in Step 4.

Mobile Email

Date of birth Relationship to investor



Declaration of representative

I, the representative, have read and agree to the conditions as detailed in the IOOF WealthBuilder PDS (and any SPDS), section entitiled 'Representative facility'.

Signature	Dealer stamp
X	
Date	
DD/MM/YYYY	

Investor(s) authority to nominate a representative

- · have read the conditions applying to the appointment of a representative in the IOOF WealthBuilder PDS (and any SPDS) and agree to those conditions
- release, discharge and agree to indemnify AULBL and any other related body corporate within the Australian Unity group and any investment management company appointed to manage the investment assets of the IOOF WealthBuilder Funds, against any and all losses, liabilities, actions, proceedings, accounts, claims and demands, (whether authorised by me/us or not) arising from the appointment of or exercise of powers by the representative
- agree that a payment made to my/our representative in accordance with the requests or instructions of the representative shall be in complete satisfaction of the obligation of AULBL to the extent of the payment, notwithstanding any fact or circumstance, including that the payment was requested, made or received without my/our knowledge or authority
- agree that if the payment is made in accordance with the request or instructions of the representative, I/we shall have no claim in relation to the payment against AULBL or any other related body corporate within the Australian Unity group; nor any investment management company appointed to manage the assets of the IOOF WealthBuilder Funds
- · understand and acknowledge that I/we are bound by the actions of my/our representative in relation to the operation of my/our investments in IOOF WealthBuilder
- authorise AULBL to continue to follow instructions regarding this authority, until further notice in writing to cancel this authority is received by AULBL.

Corporate investors

This nomination must be signed either:

- · under common seal
- by two directors or a director and company secretary
- by the sole director (where applicable).

Important note

Only sign the below if nominating a representative. All new investor(s)/policy owner(s) must also sign the declaration at Step 8.



If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary.

New investor/signatory 1		
Signature	X	Date DD/MM/YYYY
Title (such as Director/ Sole Director/Company Secretary)		
Full name		
New investor/signatory 2 (for	or joint investor or additional trustees, if applicable)	
Signature	X	Date DD/MM/YYYY
Title (such as Director/ Sole Director/Company Secretary)		
Full name		
New investor/signatory3 (fo	or joint investor or additional trustees, if applicable)	
Signature	X	Date D D / M M / Y Y Y Y
Title (if applicable)		
Full name		
Signatory 4 (for additional T	rustees if applicable)	
Signature	X	Date DD/MM/YYYY
Title (if applicable)		
Full name		
Common seal (of company) if required		



Step 7: Declaration and signature of current policy owner(s)

All current policy owner(s) of the account(s) listed in Step 1 must sign this section.

I/we the current registered policy owner(s) of the IOOF WealthBuilder account(s) listed in Step 1 of this Transfer of Ownership Form, authorise and request AULBL to transfer the ownership of the policy(ies), including full investment rights regarding the IOOF WealthBuilder account(s) listed in Step 1, to the new policy owner(s) as detailed in Step 2 of this form.

I/we confirm that:

- all details provided in this Transfer of Ownership Form are true and correct
- I/we have read the transfer of ownership section in the current IOOF WealthBuilder PDS (and any SPDS) and understand the implications of the transfer, including that, upon registration of the transfer by AULBL, I/we will have no further rights in relation to the policy(ies).

Who needs to sign?

All original investors registered on the policy(ies)/account(s) must sign this section. Individual investors must sign in the presence of a witness, who must also sign this section overleaf.

Corporate investors

This form must be signed either:

- · under common seal
- by two directors or a director and the company secretary
- by the sole director (where applicable).

Power of Attorney

If signed under a Power of Attorney, the attorney certifies that they have not received notice of revocation of that power.

The attorney's signature must be witnessed and the witness must sign overleaf.

If this form is signed under a new Power of Attorney which has not been previously registered with AULBL, please complete the Power of Attorney section in Step 1 of this form and attach a certified copy of the Power of Attorney and the required proof of identification documents in accordance with AML/CTF legislation. For further information, please refer to the 'Completing Proof of Identity' on australianunity.com.au/aulbl-wealthbuilder or alternatively call Investor Services on 1800 002 217.



If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary.

Current investor/ signatory	['] 1	
Signature	X	Date D D / M M / Y Y Y Y
Title (if applicable)		
Full name		
Current investor/ signatory	2 (for joint investor or additional trustees, if applicab	ole)
Signature	X	Date D D / M M / Y Y Y Y
Title (if applicable)		
Full name		
Current investor/ signatory	3 (for joint investor or additional trustees, if applicab	ole)
Signature	×	Date D D / M M / Y Y Y
Title (if applicable)		
Full name		
Signatory 4 (for additional T	rustees if applicable)	
Signature	X	Date DD/MM/YYYY
Title (if applicable)		
Full name		
Common seal (if required)		
Witness signature	X	Date DD/MM/YYYY
Title (if applicable)		
Full name		



Step 8: Declaration and signature of new policy owner(s)

All new policy owner(s) listed in Step 2 of this Transfer of Ownership Form must sign this section.

As the new policy owner(s) of the IOOF WealthBuilder account number(s) listed in Step 1 of this Transfer of Ownership Form, I/we accept transfer of the policy(ies) and acknowledge and agree that by signing this declaration.

I/We declare that:

- I/we agree to assume policy ownership (including all investment rights) of the IOOF WealthBuilder account(s) detailed in Step 1 of this Transfer of Ownership Form
- all details in this application form are true and correct
- I/we have received and accepted this offer in Australia
- I/we acknowledge that I/we will promptly advise my/our financial adviser and/or AULBL[^] if any of my/our details change at any time
- I/we certify that I/we am/are the applicant(s) named in Step 2 of this application form OR I/we am/are authorised to provide information and complete this application form on their behalf (i.e. by way of Power of Attorney)
- I/we am/are aware that information provided about me/us and my/our accounts may be provided to the relevant tax authority within Australia and internationally
- I/we agree to provide any information that may be required for the identification purposes of AML/CTF, FATCA and CRS laws (as applicable).

I/We confirm that I/we have read and understood:

- that an investment made in IOOF WealthBuilder does not represent an investment in AULBL, nor any related body corporate within the Australian Unity group, nor any investment management company appointed to manage the investment assets of the IOOF WealthBuilder Funds
- that neither AULBL nor any related body corporate within the Australian Unity group, nor any investment management company appointed to manage the investment assets of the 100F WealthBuilder Funds, guarantees the performance of any IOOF WealthBuilder Fund
- that investments in IOOF WealthBuilder are subject to investment risks including possible delays in repayment and loss of income and principal invested
- the PDS (and any SPDS) in full and on becoming an investor, I/we agree to be bound by the provisions of the PDS (and any SPDS) and the Benefit Fund Rule 7.4 (as amended).

Financial adviser (if applicable)

If I have acquired the services of a financial adviser to obtain advice concerning my investment in IOOF WealthBuilder then I confirm that I have been fully informed of the nature and risks of the selected investment options and am satisfied these investments are suitable for my investment needs.

I acknowledge that I will promptly advise my financial adviser and/ or AULBL if any of my details change at any time.

Investor advice fee(s) (if applicable)

- I authorise AULBL to charge the investor advice fee(s) selected against my account.
- The amount of any investor advice fee(s) that are paid to my financial adviser, or their Australian Financial Services Licensee (Licensee) as agreed by me, will be an additional cost to me and charged against my account. An advice fee will not be charged unless I tell AULBL to do so.
- · Any agreed investor advice fee(s) will be charged to my account and paid in full to the financial adviser, or their Licensee, until I instruct AULBL to cease payment or when I change my nominated financial adviser.
- Where I have chosen ongoing fees, I understand the consent for AULBL to pay the ongoing fees to my adviser will cease on the consent end date, which is 150 days after the next anniversary date, or earlier for if you have a fixed term advice arrangement, for my ongoing fee arrangement.
- I understand my consent for one-off fees will last until the oneoff fee is paid.
- I understand I can withdraw my consent or vary the ongoing fee arrangement at any time by notice in writing to my adviser, or by contacting AULBL.
- I understand I can withdraw my consent at any time before the cost is passed on to me by contacting AULBL before the fee is paid.



AML/CTF, FATCA and CRS

- I/We have provided the appropriate documents, as outlined in the 'Completing Proof of Identity' document on www.australianunity.com.au/aulbl-wealthbuilder, that may be required for the purposes of the Anti- Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF Act).
- I/We confirm that I/we have correctly indicated any applicable foreign or United States tax residency status, for Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) laws, in Step 2 of this application form and during the customer identification process.
- If I/we previously have opened an AULBL product and my/ our adviser has not conducted the customer identification procedure under AML/CTF, FATCA and CRS laws, in conjunction with this application, I/we confirm that I/we are not a foreign resident or US citizen(s) or resident(s) for tax purposes, or are not purchasing this product on behalf of another foreign resident, and/or US citizen or resident for tax purposes.

Privacy

Information (including my/our personal information) provided to AULBL is used for the purpose of opening an investment account and for other related purposes. AULBL may disclose my/ our personal information to its related bodies corporate, a person with whom I/we have a joint investment, my/our financial adviser, professional advisers, businesses that have referred me/us to AULBL, banks and other financial institutions, or to provide me/us with information about other products or services that may be of interest to me/us.

AULBL is required to collect my/our personal information under the Corporations Act 2001, the AML/CTF, FATCA and CRS laws. If I/we do not provide all of the requested information, AULBL may not be able to action my/our request. To verify my/our identity for Know Your Customer (KYC) purposes, AULBL may also solicit personal information about me/us from reliable identity verification service providers.

My/Our personal information will be handled in accordance with AULBL's Privacy Policy. The Privacy Policy contains information about how I/we may access or correct my/our personal information held by AUWBL and how I/we may complain about a breach of the Australian Privacy Principles. I/We may request a copy of the Privacy Policy by contacting AULBL on 1800 002 217 or at australianunity.com.au/AULBL/privacy

Marketing material

If you do not agree to AULBL or any related body corporate within the Australian Unity group using your personal information for the purposes of marketing the products and services of the Australian Unity group from time to time, then please tick this box:



Child's Advancement Policy

If any of the IOOF WealthBuilder accounts listed in Step 1 are Child's Advancement Policies, by signing this declaration I understand and acknowledge that:

- I will hold the Child's Advancement Policy in trust for the existing life insured (child), until they reach vesting age
- the Child's Advancement Policy will be automatically transferred to the life insured when the vesting age is reached
- until the vesting age is reached, I will have full control over the Child's Advancement Policy
- I may apply the proceeds of the Child's Advancement Policy as I think fit for the maintenance or benefit of the life insured in accordance with section 220 of the Life Insurance Act 1995
- in the event of the death of the life insured before vesting age is reached, I will retain ownership of the Child's Advancement Policy.

Individual investors

Individual investors must sign in the presence of a witness, who must also sign this section on page 25.

Power of Attorney

If signed under a Power of Attorney, the attorney certifies that he/she has not received notice of revocation of that power. The attorney's signature must be witnessed and the witness must sign overleaf.

Please attach a certified copy of the Power of Attorney and the required proof of identification documents in accordance with AML/CTF legislation. For further information, please refer to the 'Completing Proof of Identity' on australianunity.com.au/aulbl-wealthbuilder or alternatively call our client services team on 1800 002 217.

Corporate investors

This Transfer of Ownership Form must be signed either:

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



If not signing under common seal, please state your title, e.g. Director, Company Secretary or Sole Director and Company Secretary.

New investor/signatory 1		
Signature	X	Date D D / M M / Y Y Y Y
Title (if applicable)		
Full name		
New investor/signatory 2 (f	for joint investor or additional trustees, if applicable)	
Signature	X	Date D D / M M / Y Y Y
Title (if applicable)		
Full name		
New investor/signatory 3 (f	for joint investor or additional trustees, if applicable)	
Signature	X	Date DD/MM/YYYY
Title (if applicable)		
Full name		
Signatory 4 (for additional T	rustees if applicable)	
Signature	X	Date DD/MM/YYYY
Title (if applicable)		
Full name		
Common seal (if required)		
Witness signature	X	Date D D / M M / Y Y Y Y
Title (if applicable)		
Full name		





IOOF WealthBuilder, Reply Paid 264, Melbourne VIC 8060



Facsimile:



Enquiries: 1800 002 217



Email:

investorservices@insigniafinancial.com.au