

# Withdrawal Option Form



## TaxSmart Investments

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

Title  Mr  Mrs  Ms  Miss Date of birth  /  /

Name in full

Residential address (not a PO Box)

Suburb  State

Postcode  Country

Phone  Mobile

Email

### 2. Type of Withdrawal

Please choose one of the following

- Full Withdrawal (Interim rate of interest will apply if an interest paying investment option if fully withdrawn prior to performance declarations)
- Partial Withdrawal (minimum amount \$500)
- Please withdraw from my current investment fund proportions

Amount required \$

#### Or Investment Option Selection

Cash Enhanced Option  \$ or %

High Yield Option  \$ or %

Growth Option  \$ or %

Australian Shares Option  \$ or %

Total (Overall % must equal 100)  \$ or %

### 3. Financial Institution Account Details

Bank Name

Address

Account Name

Branch Number (BSB)  Account Number

#### 4. To better understand our investor needs, please indicate reason your reason for withdrawal

- Purchased Property/Purchased Car       Purchased other
- Payment of a debt       Investment has reached maturity
- Income support/Living expenses

Invest elsewhere – please specify

#### Notes

- Minimum remaining balance \$1,000 to keep investment open.
- Withdrawals from the High Yield Option require 25 business days notice.
- Direct Bank Credit funds cleared immediately after they have been credited to your nominated account.
- Cheques are available on request - please contact our Investor Services Team on 1300 1300 38 for further information.
- For security reasons no 3rd party bank credits will be issued.

#### 5. Signature(s)

In consideration of payment of the value of that part of my investments listed above

I hereby waive all rights to further claims under the above investments for that part of the benefit so withdrawn.

#### 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:

**114 Albert Road, South Melbourne VIC 3205**



#### Fax

1800 804 890



#### Email

[enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au)

#### Contact us



Australian Unity  
114 Albert Road, South Melbourne VIC 3205



[australianunity.com.au/wealth](http://australianunity.com.au/wealth)

#### Investor Services



[enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au)



1300 1300 38



1800 804 890

#### Adviser Services



[investmentbonds@australianunity.com.au](mailto:investmentbonds@australianunity.com.au)



1300 133 285



1800 804 890