Change of Details Form Superannuation Products only

Please use this form to update your details for:

- FirstChoice Personal Super (010)
- FirstChoice Wholesale Personal Super (011)
- Rollover and Superannuation Fund (060)



SAVE FORM

PRINT FORM

Please complete this form using BLACK INK and print well within the boxes in CAPITAL LETTERS. Mark appropriate answer boxes with a cross like the following X . Start at the left of each answer space and leave a gap between words.				
Fields marked with an asterisk (*) must be completed. Please indicate your reason(s) for completing this form:				
I want to change my contact details – complete Parts 1, 2 and 7				
I want to provide my tax file number – complete Parts 1, 3 and 7				
I want to change my bank account details – complete Parts 1, 4 and 7				
I want to update or change my name – complete Parts 1, 5 and 7				
I want to change my online account access – complete Parts 1, 6 and 7				
1 INVESTOR DETAILS				
Account number* – To avoid processing delays please ensure your account number is clearly marked.				
Title Mrs Miss Ms Other				
Full given name(s)*				
Surname*				
Date of birth* dd/mm/yyyy				
2 USE THIS SECTION TO UPDATE YOUR CONTACT DETAILS				
For security purposes please ensure both existing and new details are completed.				
Existing Residential address (PO Box is NOT acceptable)				
Unit Street Street number name				
Suburb State Postcode Postcode				
Country				
New residential address (PO Box is NOT acceptable)				
Unit Street Street number name Street				
Suburb State Postcode Postcode				
Country				
Existing postal address				
Unit Street number PO Box Street name				
Suburb State Postcode Postcode				
Country				

2 USE THIS SECTION TO UPDATE YOUR CONTACT DETAILS (CONTINUED)				
New postal address				
Unit number Street number PO Box	Street name			
Suburb	State Postcode			
	State Tostcode			
Work phone number Home phone number	Fax number Mobile phone number			
Work priorie number	Mobile priorie namber			
Email address				
Littali address				
New email address				
Tww chair address				
3 USE THIS SECTION TO PROVIDE YOUR TAX FILE NUMBER	(TFN)			
TAX FILE NUMBER (Please refer to attached instructions for inform	· · · · · · · · · · · · · · · · · · ·			
providing your TFN. This could mean that you will pay more tax or	that certain contributions will not be accepted).			
TFN LLL LLLL				
4 USE THIS SECTION TO CHANGE YOUR BANK ACCOUNT DE	ETAILS			
Please note: New bank account details cannot be accepted via far				
I/We authorise Colonial First State Investments Limited (User ID				
	d in the schedule below, any amounts which Colonial First State may			
debit or charge me/us through the Bulk Electronic Clearing System Please note: Third party bank accounts cannot be used for transaction	ing online without authorisation and signatures from all account holders.			
Name of Australian financial institution				
Branch name or address				
Branch number (BSB) Account number				
Name of account holder				
Please update the following services with these new bank account details. Please tick the appropriate box(es):				
Regular Monthly Investment Plan Online Services				
Please note that by providing bank details in this section you auth				
transaction requests that you nominate. Please see the terms an	id conditions in the current Product Disclosure Statement (PDS).			
Cross (X) this box if you wish to remove your existing bank of	details.			
Signature of bank account holder	Signature of bank account holder			
Print name	Print name			
Date signed	Date signed			

com.au/prospects/FS4523.pdf. Please ensure you provide a certifie for Anti-Money Laundering requirements.	· · · · · · · · · · · · · · · · · · ·
Title Mr Mrs Miss Ms Other	
Full given name(s)*	
Surname* (Please supply relevant certified documents if details have	ve changed)
(i lease supply leistain sertimed assumence ii detaile has	o changea)
Date of birth* dd/mm/yyyy	
Old signature of member	New signature of member
Print name	Print name
Date signed dd/mm/yyyy	Date signed dd/mm/yyyy
6 USE THIS SECTION TO CHANGE YOUR ONLINE SERVICES	
You can elect to access your investment details over the internet the	nrough FirstNet.
Online access is provided under the terms and conditions outlined available to certain investors, and will vary across our product rang	
Any selection you make in this section will apply to all investments access will be automatically provided for FirstNet.	you hold with us. If you do not make a selection, online enquiry
What type of online access do you require? Transaction access Enquiry access No online access	ccess

If your name has changed, please attach a copy **certified** by a Justice of the Peace, solicitor or notary of the documentation by which you registered your change of name, such as a Marriage Certificate, Deed Poll or Decree nisi (in the case of divorce).

5 USE THIS SECTION TO UPDATE OR CHANGE YOUR ACCOUNT NAME

7 DECLARATION

I declare that:

- · all details in this form are true and correct
- if this form is signed under Power of Attorney, the Attorney declares that they have not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this form unless we have already sighted it)
- I release and indemnify Colonial First State against any liabilities whatsoever arising out of Colonial First State acting on any communications received by phone, fax, or other electronic means including without limitation transactions effected through the internet in respect of my investments
- Colonial First State and/or its related entities will not be liable to me or other persons for any loss suffered (including consequential loss) in circumstances where transactions are delayed, blocked, frozen or where Colonial First State refuses to process a transaction or ceases to provide me with a product or service.

I acknowledge that:

 neither Colonial First State, nor any other member of the Commonwealth Bank Group guarantees the repayment of capital or the performance of the funds or any particular rate of return from the funds.

DIRECT DEBIT REQUEST AUTHORISATION

- I authorise Colonial First State Investments Limited (User ID 011802) to arrange for funds to be debited from my/our account at the financial institution identified in section 4 above and as prescribed through the Bulk Electronic Clearing System (BECS);
- I have read the 'Direct Debit Customer Service Agreement' provided with this form and agree with its terms and conditions;
- I request this arrangement to remain in force in accordance with details set out in section 4 and in compliance with the 'Direct Debit Customer Service Agreement'.

Investments in:

- Colonial First State FirstChoice Personal Super USI FSF0217AU, Colonial First State FirstChoice Wholesale Personal Super USI FSF0511AU (referred to as 'FirstChoice' or 'the fund') are offered from Colonial First State FirstChoice Superannuation Trust ABN 26 458 298 557 by Colonial First State Investments Limited ABN 98 002 348 352 AFS licence 232468.
- Rollover & Superannuation Fund USI FSF0172AU (referred to as 'the fund') is offered from Colonial First State Rollover & Superannuation Fund ABN 88 854 638 840 by Colonial First State Investments Limited ABN 98 002 348 352 AFS Licence 232468.

Date signed dd/mm/yyyy	Print name
Please send the co	ompleted form to:
Colonial F Reply Paid 27, Sy	
-	
INTERNAL USE ONLY (COLONIAL FIRST STATE OF	FICES AND COMMONWEALTH BANK BRANCHES)
Client identified by (provide the employee name)	CBA Branch/Company stamp (please use black ink only)
Date dd/mm/yyyy	
Signature	

This booklet provides general information only and is not financial advice or a recommendation to withdraw monies from superannuation. It does not take into account your individual objectives, financial situation or needs. Colonial First State Investments Limited ABN 98 002 348 352, AFS Licence 232468 (Colonial First State) is the issuer of interests in FirstChoice Personal Super, FirstChoice Wholesale Personal Super and FirstChoice Employer Super from the Colonial First State FirstChoice Superannuation Trust ABN 26 458 298 557 and interests in the Rollover & Superannuation Fund from the Colonial First State Rollover & Superannuation Fund ABN 88 854 638 840 and interests in the Colonial First State Pooled Superannuation Trust ABN 51 982 884 624. Product Disclosure Statements (PDS) are available from our website colonialfirststate.com. au or by calling 13 13 36. You should read the relevant PDS and assess whether the information is appropriate for you and consider talking to a financial adviser before making an investment decision. Colonial First State Investments Limited is a wholly owned subsidiary of Commonwealth Bank of Australia. Commonwealth Bank of Australia or its subsidiaries and investment-type products are subject to risk, including possible loss of income and capital invested.

Important information about changing your account details

How do I change my account details?

As an investor with Colonial First State there are a number of ways you can make changes to your account including over the internet, by phone, letter, fax or by using the pre-printed form attached.

The following circumstances may constitute a change of account details:

- Updating your contact details (address, phone number etc)
- · Changing or providing your Tax File Number
- Changing your Australian financial institution account
- · Updating or changing your account name

What happens if you do not quote your Tax File Number (TFN)?

You are not obligated to provide your TFN to your super fund. However, if you do not provide your TFN, you may be taxed at the highest marginal tax rate plus Medicare and other applicable levies on contributions made to your account in the year, compared to the concessional tax rate of 15%. We may deduct this additional tax from your account.

If we do not have your TFN, you will not be able to make personal contributions to your account. Choosing to quote your TFN will also make it easier to keep track of your super in the future.

Under the Superannuation Industry (Supervision) Act 1993, your superannuation fund is authorised to collect your TFN, which will only be used for lawful purposes. These purposes may change in the future as a result of legislative change. The TFN may be disclosed to another superannuation provider, when your benefits are being transferred, unless you request in writing that your TFN is not to be disclosed to any other trustee.

Warning: Your Tax File Number (TFN)

Under super law (Superannuation Industry Supervision (SIS) Act 1994) we can collect your TFN. If you provide your TFN, it will be treated confidentially.

If you give us your TFN, you are giving us consent to use it for legal purposes, including:

- · calculating the tax on any benefits you're entitled to
- providing information, including your TFN, to the Commissioner of Taxation
- seeking information about your other super accounts, such as using the ATO's SuperMatch program.

If we find other super accounts with other providers, we'll contact them to check that the information is correct, then we'll contact you to see if you would like us to consolidate your super accounts with us.

If you ever ask us to roll over your benefits to another super fund, we may also give your TFN to that fund.

You don't have to give us your TFN – it's not required by law. But if you don't:

- you may pay more tax on your benefits than you would otherwise have to – sometimes significantly more
- you also may not receive Government co-contributions that you may otherwise be eligible for
- it may be difficult to find and consolidate your super benefits or to pay the benefits you are entitled to receive.

Direct debit customer service agreement

Our commitment to you

- We will send you regular transaction statements in addition to the initial confirmation of your drawings.
- Where the due date for a drawing falls on a non-business day, we will draw the amount on the next business day.
- We will provide written notice of any proposed changes to your drawing arrangement, providing no less than 14 days notice.
- We may terminate your direct debit arrangement if drawings are returned unpaid, or if debit is unsuccessful three times in any 12-month period.
- We will keep all information provided by you, and details of your nominated account at the financial institution, private and confidential.
- We will investigate and deal promptly with any queries, claims or complaints regarding debits, providing a response within 21 business days.

Your commitment to us

- It is your responsibility to check with your financial institution prior to completing the direct debit request, that direct debiting is available on that account.
- It is your responsibility to ensure that the authorisation on the direct debit request is identical to the account signing instruction held by the financial institution of the nominated account.
- It is your responsibility to ensure at all times that sufficient funds are available in the nominated account to meet a drawing on the due date for payment.
- It is your responsibility to advise us if the account nominated by you to receive the drawings is altered, transferred or closed.
- It is your responsibility to arrange with us a suitable alternate payment method if the drawing arrangements are stopped either by you or the nominated financial institution.
- It is your responsibility to meet any charges resulting from the use of the direct debit system. This may include fees charged by us as a result of drawings returned unpaid.

Your rights

- You may request to defer or alter the agreed drawing schedule by giving written notice to us or by calling Investor Services on 13 13 36. Such notice should be received by us at least five business days prior to the due date for the next drawing.
- You may cancel the direct debit arrangement at any time by giving written notice to us or by calling Investor Services on 13 13 36. Such notice should be received by us at least five business days prior to the due date for the next drawing. Your nominated financial institution may also accept a request to cancel your direct debit arrangement with us.
- All transaction disputes, queries and claims should be raised directly with us. We will provide a verbal or written response within 21 business days from the date of the notice. If the claim/dispute is successful, we will reimburse you by way of cheque or electronic credit to your nominated account.

Please phone Colonial First State Investor Services on 13 13 36 with any questions or send an email to contactus@colonialfirststate.com.au