

3. NOMINATED BENEFICIARIES

You can nominate up to five beneficiaries, including your Estate.

Please use whole figures when specifying the '% of benefit'.

! YOUR TOTAL NOMINATION MUST EQUAL 100%.

! YOUR REQUEST WILL BE INVALID IF THE TOTAL NOMINATION (% OF BENEFIT) DOES NOT EQUAL 100%.

Full name* of beneficiary	% of benefit
Dependant 1 <input type="text"/> Relationship Spouse <input type="checkbox"/> De facto spouse <input type="checkbox"/> Child <input type="checkbox"/> Interdependency relationship <input type="checkbox"/> Financial dependant <input type="checkbox"/>	_____ %
Dependant 2 <input type="text"/> Relationship Spouse <input type="checkbox"/> De facto spouse <input type="checkbox"/> Child <input type="checkbox"/> Interdependency relationship <input type="checkbox"/> Financial dependant <input type="checkbox"/>	_____ %
Dependant 3 <input type="text"/> Relationship Spouse <input type="checkbox"/> De facto spouse <input type="checkbox"/> Child <input type="checkbox"/> Interdependency relationship <input type="checkbox"/> Financial dependant <input type="checkbox"/>	_____ %
Dependant 4 <input type="text"/> Relationship Spouse <input type="checkbox"/> De facto spouse <input type="checkbox"/> Child <input type="checkbox"/> Interdependency relationship <input type="checkbox"/> Financial dependant <input type="checkbox"/>	_____ %
and/or Estate	_____ %
TOTAL	100%

* As appears on birth certificate or driver's licence.

! ENSURE THAT YOU AND YOUR WITNESSES HAVE SIGNED AND DATED THE DECLARATION ON THE NEXT PAGE.



4. INVESTOR DECLARATION – MANDATORY

! IF YOU ARE MAKING OR REVOKING A BINDING DEATH BENEFIT NOMINATION, THIS FORM MUST BE SIGNED AND DATED IN THE PRESENCE OF TWO WITNESSES.

! A NOMINATED BENEFICIARY CANNOT BE A WITNESS.

I have read the information on completing this form and confirm my nomination indicated under Section 1 Nomination details.

Signature

Date (dd/mm/yy)

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5. WITNESSES' DECLARATION – MANDATORY WHEN MAKING OR REVOKING A BINDING DEATH BENEFIT NOMINATION

! MUST BE SIGNED AND DATED AT THE SAME TIME THE INVESTOR DECLARATION IS SIGNED.

! YOUR REQUEST WILL BE INVALID IF ALL THREE DATES ARE NOT THE SAME.

We declare that:

- > We have turned 18 years of age and we are not nominated beneficiaries for this account.
- > This nomination/revocation was signed by the investor in our presence.

Witness 1: Full name

Signature

Date (dd/mm/yy)

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Witness 2: Full name

Signature

Date (dd/mm/yy)

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SEND THIS COMPLETED FORM TO US:

Online: Using our secure Document Upload facility on Investor Online or AdviserNET (accessed from Forms > Document Upload menu)

By Post: Advance Asset Management
GPO Box B87, Perth WA 6838

By Email: investorservices@advance.com.au

By Fax: (08) 9481 4834

FOR FURTHER ASSISTANCE CONTACT:

CUSTOMER RELATIONS
1800 819 935

FAX
(08) 9481 4834

EMAIL ADDRESS
investorservices@advance.com.au

INTERNET ADDRESS
advance.com.au

ADVANCE
ASSET MANAGEMENT

If you submit online, email or fax, you don't need to post us the original.



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