

Investment instruction switch form

Name	<input type="text"/>															Member number	<input type="text"/>								
Address	<input type="text"/>																								
City/ suburb	<input type="text"/>															State	<input type="text"/>			Postcode	<input type="text"/>				
Phone (business hours)	<input type="text"/>			<input type="text"/>			Fax	<input type="text"/>		<input type="text"/>			<input type="text"/>												

Investments

Note to member: This selection will apply to all contributions until we are notified otherwise in writing.

Please amend my investment instructions as follows:

- For the enclosed contribution only
- For the enclosed and future contributions
- For my existing investment only
- For all existing and future contributions
- For all future contributions only

Strategy

- Australian Ethical Balanced Strategy
- Australian Ethical Equities Strategy
- Australian Ethical Large Companies Share Strategy
- Australian Ethical World Strategy
- Australian Ethical Income Strategy

Percentage %

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

See page 25 of the Short Form PDS for charges to switch between strategies.

I hereby authorise the adviser remuneration shown below.

Signature

Date

/
/

Adviser information (to be completed by the investment adviser, if applicable)

Adviser details

Dealer stamp

Signature of authorised adviser

Adviser commission section

(Unless this section is filled in and signed by the adviser, the full up-front switch commission is payable to the adviser)

Switch up-front %

Commission % on new money going into new strategy/ ies selected in this switch

Commission is only payable for a switch if the member is moving to a strategy with a higher contribution fee. The maximum commission payable is 1.5% (exclusive of GST).

Printed name



If you have any queries regarding this form please call us on 1300 134 337.

When completed, return to: Australian Ethical Superannuation, PO Box 1916 Wollongong NSW 2500.

You may photocopy this form. You must post this form. Do not fax.