

CLIENT/ACCOUNT DETAILS

Account Name Account Number

Type of Fund from which withdrawal is to be made:

At Call Long Term* Fixed Term* Select Mortgage* Australian Share Balanced International Diversified Property Equity

*An early withdrawal from these funds may incur a fee. Is this an Early Withdrawal?

Yes No

WITHDRAWAL INSTRUCTIONS

Full Withdrawal Partial Withdrawal Interest Only

Date to be processed

If Joint Account are both signatures required Yes No

DEPOSIT TO BANK ACCOUNT

Nominated Account Other

Name of Bank Branch

Account Name

BSB Account Number

Amount to be deposited to Bank Acct \$ Lodgement Reference

Nominated Account Other

Name of Bank Branch

Account Name

BSB Account Number

Amount to be deposited to Bank Acct \$ Lodgement Reference

TRANSFER TO A TPTL ACCOUNT

Amount to be deposited to TPTL Acct \$

Account Number Type of Fund

Account Name

CHEQUES TO BE DRAWN

Payable to	Cheque Number (Office Use Only)	Amount of Cheque
<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"/>
Total Amount of Withdrawal <i>(Branch Manager/Delegate Authorisation required for withdrawals over \$25,000)</i>		\$ <input type="text"/>

* Under the terms of the Product Disclosure Statement, an early redemption fee may apply for redeeming investments prior to the investment period from the Fixed Term, Long Term Funds and Select Mortgage Fund. In signing this redemption you hereby authorise an adjustment (if applicable) to be made to the amount in accordance with the Funds' Constitution. A statement providing details of all transactions including interest distribution will be issued at the end of each quarter.

Account Signature 1

Date

Account Signature 2

Date

Withdrawal Application

OFFICE USE ONLY

Method of Withdrawal: In person Telephone Facsimile Post Early Withdrawal Fee

Account Signature Verification: Photo ID Internal Signature Check

Agent Signature Verification: Photo ID Internal Signature Check

Checked and prepared by: (print name)

Date

Processed by: (print name)

Date

Signature

Date

If withdrawal > \$25,000 Branch Mgr/Delegate Authority

Date

If > \$50,000 copy to Asset Mgt

Cheques to be collected by Client Agent Date

Name of Authorised Agent

Collected by (Sign)

Cheques to be posted to

Name

Address

Street / PO Box No.

Suburb State Postcode