

# Investment Options Change for Accumulation Plan members



### Who should use this form?

This form should be completed if you are an Accumulation Plan member and you would like to change your investment choice for your existing Accumulation Plan account balance and/or future contributions.

You should not complete this form if you want to change your investment choice for a Beneficiary Account or Income Stream account, you need to complete the relevant *Investment Options Change* form for that product. Please contact us for further information.

### Before you start

If you are changing your investment choice for your existing account balance, please note that if your completed form is received by ESSSuper prior to close of business on the 20th day of the month, your requested change will take effect from the first day of the following month (e.g. if received by 20 June, the effective date will be 1 July). If the 20th day of the month is not a business day your completed form must be received by close of business on the last business day prior to the 20th.

Any change to the way your future contributions are invested will take effect from the day ESSSuper receives your completed form.

If you have a Member's Online Account, confirmation of your investment option selection can be found in your transaction history and once the selection takes effect it can be viewed on your investment summary page.

Further information regarding changing your investment options is available in the flyer *Thinking of Changing your Investment Options* or the *Accumulation Plan Product Disclosure Statement*: available at [esssuper.com.au](http://esssuper.com.au) or by calling the Member Service Centre. You can return the completed form to ESSSuper by post, fax or email. Refer over the page for ESSSuper's full contact details.

Please complete this form in pen using CAPITAL letters and mark with an [X] where applicable.

### Section 1

### Member details

Member number	<input type="text"/>											
Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Other	(please specify)	<input type="text"/>					
Surname	<input type="text"/>											
Given names	<input type="text"/>											
Date of birth	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>						
Postal address	<input type="text"/>											
Suburb	<input type="text"/>											
State	<input type="text"/>	Postcode	<input type="text"/>									
<input type="checkbox"/> Mark with an [X] if your postal and residential address are the same. If your residential address is different, please specify below.												
Residential address	<input type="text"/>											
Suburb	<input type="text"/>											
State	<input type="text"/>	Postcode	<input type="text"/>									
Telephone (business hours)	(	<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"/>
		(after hours)	(	<input type="text"/>	)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone (mobile)	<input type="text"/>											
Email address	<input type="text"/>											

By providing your email address you are authorising ESSSuper to send communications to that address. This authorisation will apply until it is revoked by you.

Section 2

Investment change details

I would like to change (please choose only one):

Both my existing account balance AND my future contributions (complete **both** SECTIONS 2A and 2B).

**Note:** if you choose this option and you do not complete both SECTIONS 2A and 2B, we will apply any investment choice you make to both your existing account balance and future contributions.

OR  Only my existing account balance (complete **only** SECTION 2A)

OR  Only my future contributions (complete **only** SECTION 2B)

Section 2A

Investment choice for existing account balance

I would like to invest my **existing account balance** as follows:

Complete this section if you would like to change the way your **existing balance** is invested.

**Standard Options**

Shares Only	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
High Growth	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Growth (default)	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Balanced	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Conservative	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Defensive	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Cash	<input type="text"/>	<input type="text"/>	<input type="text"/>	%

**Alternative Options**

Basic Growth	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Ethically Minded	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
<b>Total</b> (must equal 100%)	<b>1</b>	<b>0</b>	<b>0</b>	%

Section 2B

Future contributions

I would like to invest my **future contributions** as specified:

**Standard Options**

Shares Only	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
High Growth	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Growth	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Balanced	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Conservative	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Defensive	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Cash	<input type="text"/>	<input type="text"/>	<input type="text"/>	%

**Alternative Options**

Basic Growth	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
Ethically Minded	<input type="text"/>	<input type="text"/>	<input type="text"/>	%
<b>Total</b> (must equal 100%)	<b>1</b>	<b>0</b>	<b>0</b>	%

## Section 3

## Declaration and signature

I acknowledge and agree that:

- I have read and understood the information regarding my investment options contained in the *Accumulation Plan Product Disclosure Statement* and *Investment Guide (AP.3)* available from ESSSuper and have considered obtaining independent financial advice in respect of my superannuation options. The information provided by ESSSuper is of a general nature and does not constitute personal financial advice.
- I accept the investment risks and returns of the investment choice I have made and understand that neither the Emergency Services Superannuation Board nor the Victorian Government is responsible for the decision I have made. My benefits are not guaranteed or underwritten by the Victorian Government or ESSSuper and ESSSuper does not come under the jurisdiction of the Australian Financial Complaints Authority (AFCA).
- My contributions and investment income will be invested in accordance with my instructions on this form. The investment choice I have made on this form will apply until I make a new investment choice.
- I have read and accept the statements relating to privacy (and in particular to the collection, use and disclosure of personal information by ESSSuper) which appear in the *Accumulation Plan Product Disclosure Statement* available from ESSSuper.
- I fully understand and accept the implications of the election I have made on this form and I declare that the information provided on this application is true and correct.

Signature

PLEASE SIGN HERE

Date

/  /

**Please forward this completed form to**

ESSSuper GPO Box 1974, Melbourne Vic 3001

T 1300 650 161 | F 1300 766 757 | [esssuper.com.au](http://esssuper.com.au)

At ESSSuper, we treat the privacy and confidentiality of our members' personal information seriously. We are committed to complying with the guidelines of the *Privacy and Data Protection Act 2014* and the *Health Records Act 2001 (Vic)*. To obtain a copy of ESSSuper's privacy policy go to our website at [esssuper.com.au](http://esssuper.com.au)