

Investment choice form

PLEASE COMPLETE FORM IN BLOCK LETTERS IN BLACK INK

1. Your Accountants Super membership details

Your Accountants Super member number (if known)

Male

Female

Surname (mandatory*)

Title

Date of birth (DDMMYYYY mandatory*)

Given name (mandatory*)

Previous surname (if different)

Unit / street number

Street name

Suburb / town

State

Postcode

Email address** (Please **do not** leave any spaces empty, continue word on next line if necessary)

Phone (after hours)

Mobile**

Phone (business hours)

Fax

* If these fields are not completed, we may not be able to complete your request.

** Providing your mobile number/email address means you are willing to receive important information about your Accountants Super account and other benefits and services by SMS or email.

2. Investment choice

(You **must** complete all details in this section)

* Growth is the default option, if you do not make a selection for your future contributions or your current balance, it will be invested in this option.

1. Aggressive

Future contributions

%

Existing account balance

%

2. Growth*

%

%

3. Moderate

%

%

4. Stable

%

%

5. Australian Shares

%

%

6. Overseas Shares

%

%

7. Property

%

%

8. Bonds

%

%

9. Cash

%

%

Total

100 %

100 %

3. Privacy Statement

The information requested on this form is required in order to administer your membership. Your personal information may be provided to a financial adviser nominated by you and/or your employer. It may also be provided to specific organisations to provide services to you on our behalf. Your personal information will not be used or disclosed for any other purpose without your consent. If you do not provide the information requested, Accountants Super may not be able to administer your account. You may have access to the information Accountants Super holds about you. If you would like a copy of our Privacy Statement, please visit our website or call 1300 651 331.

4. Declaration

I acknowledge that I have read and understand the investment information contained in the Accountants Super Product Disclosure Statement including the investment objectives and strategies of each option.

I understand and acknowledge that my direction relates to an investment option or options formulated by the Trustee and not to the underlying financial products or managers utilised by the Trustee to implement the strategy or strategies. The Trustee may change the underlying financial products at its discretion from time to time.

I understand that neither the Trustee or its related entities guarantees my investment in the Fund or any particular rate of return. I accept that the Trustee shall not be liable for any loss due to any choice of investment option made by myself or the Trustee.

I understand that the Trustee cannot provide me with advice that takes into account my personal situation, objectives or needs and that if I require such advice I should consult an appropriately licensed or authorised financial adviser.

I understand that if I have selected investment options without any professional advice regarding my own circumstances or I have chosen not to provide all the information required by my advisor or I have chosen to take up an option(s) that differs from my adviser's recommendations, I may be making investment decisions or a financial commitment in respect to my superannuation based on my own views that may not suit my needs.

Signed

Date

5. Please return this form to:

Accountants Super
GPO Box 3607
Melbourne Vic 3001

For further information:

Phone: 1300 651 331
Fax: 1300 655 490
Email: info@accountants-super.com
Website: www.accountants-super.com

Professional Associations Superannuation Limited
(ABN 14 056 917 303 AFSL 222590) as Trustee
of Professional Associations Superannuation Fund
(PASF) (ABN 78 984 178 687 RSE R1000429).
Accountants Super is a division of PASF.