

KeyInvest Investment Bonds

Withdrawal Form



This form should be completed if you wish to make a withdrawal from your investment with KeyInvest.
Please return the completed form to KeyInvest Ltd (KeyInvest) or phone KeyInvest on 1300 658 904.

Member No:

Policy No:

1) POLICY OWNER(S) DETAILS

Policy Owner 1

Title Mr Mrs Ms Miss Dr Other

Surname/Company/
Trust Name

Given name(s)

Date of birth If Company, ABN

Policy Owner 2

Title Mr Mrs Ms Miss Dr Other

Surname/Company/
Trust Name

Given name(s)

Date of birth If Company, ABN

Contact Details

Unit no. Street No.

Street name Suburb

State Postcode Country

Home Phone

Bus/Mobile Fax

Email

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2) PAYMENT INSTRUCTIONS

Please note third party payments are not available.

- Credit my financial institution account (complete Section 3)
- Mail a cheque (cheques will be mailed to Policy Owner 1 at the address included under Contact Details)

3) NOMINATED ACCOUNT DETAILS

Please credit my withdrawal to the account below.

Name of Financial Institution	<input type="text"/>		
Branch	<input type="text"/>		
Account Holder's Name	<input type="text"/>		
BSB Number	<input type="text"/>	-	<input type="text"/> Account Number <input type="text"/>

4) WITHDRAWAL INSTRUCTIONS

Life Events Bond or Supersaver Bond Fund – A withdrawal made before the end of your '10 year anniversary' of your Life Events Bond or Supersaver Bond Fund policy may result in tax implications. Refer to the PDS for more information and it is recommended that you seek advice from your Financial Adviser.

Minimum account balance for the Life Events Bond is \$500 and \$1000 for the Supersaver and Income Security Fund.

- Full Withdrawal** (Go to section 5)
- Partial Withdrawal** Please indicate in section 4(a) or 4(b) the amount to be withdrawn in dollars against the relevant fund.

4a) CAPITAL GUARANTEED FUNDS

Investment Fund	Withdrawal amount
Supersaver Bond Fund (min \$500)	\$
Income Security Fund (min \$200)	\$
Life Events Bond	Please complete section 4b

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4b) LIFE EVENTS BOND (min \$100 and \$25 per investment option)

No.	Investment Option	Fund Manager	Withdrawal Amount	Fund Code KI use only
PART A1 - INDEXED DIVERSIFIED				
1	Conservative indexed	Vanguard	\$	11
2	Balanced indexed	Vanguard	\$	12
3	Growth indexed	Vanguard	\$	13
4	High growth indexed	Vanguard	\$	14
PART A2 - INDEXED SECTOR				
5	Fixed interest indexed	Vanguard	\$	15
6	Australian property securities indexed	Vanguard	\$	16
7	Australian shares indexed	Vanguard	\$	02
8	International shares indexed	Vanguard	\$	17
PART B - DIVERSIFIED				
9	Conservative	Russell	\$	10
10	Balanced	Russell	\$	04
11	Growth	Russell	\$	05
12	High growth	Russell	\$	06
13	Inflation plus assertive	MLC	\$	18
PART C - SECTOR SPECIFIC				
14	Australian cash	Russell	\$	09
15	Term deposit	KeyInvest	\$	01
16	Active cash	Smarter Money	\$	19
17	Fixed interest	Schroder	\$	20
18	Australian property securities	MLC	\$	21
19	Infrastructure	Magellan	\$	22
20	Australian shares	Fidelity	\$	23
21	Australian shares multi	Russell	\$	07
22	Australian shares value	Investors Mutual	\$	24
23	Australian shares industrial	Investors Mutual	\$	25
24	Australian/International shares long-short	Watermark	\$	26
25	Australian shares geared	Perpetual	\$	27
26	International shares multi	Russell	\$	08
27	International shares	Magellan	\$	28
TOTAL LIFE EVENTS BOND			\$	

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5) DECLARATION

I/We the policy owner(s), whose signature(s) appear below, hereby understand/acknowledge and agree as follows:

- My/our decision in relation to this product is based on the material received, including the PDS which I/we have received, read and understood.
- In the event of any inconsistency between the terms of my/our Policy and the information contained in the PDS, the terms of the policy will prevail.
- I/We acknowledge that for the Life Events Bond, the unit price used to redeem units will be the unit price effective the day that KeyInvest receives the completed withdrawal form. Redemption requests received after 2.00pm CST on a Tuesday will be processed using the following day's unit price.
- In consideration of payment of the amount withdrawn as herein stated, I/we hereby waive all rights to further claims on KeyInvest Ltd under the above Policy for that amount so surrendered.

Signature of Policy Owner 1

Date / /

Signature of Policy Owner 2

Date / /

Company Seal
(if applicable)



6) CONTACT DETAILS

Street Address: KeyInvest Ltd
Level 5, 49 Gawler Place
Adelaide SA 5000

Phone: 1300 658 904
Email: info@keyinvest.com.au
Web: www.keyinvest.com.au
Hours of Operation: 8.30am - 5.00pm (CST)

Postal Address: KeyInvest Ltd
PO Box 3340
Rundle Mall SA 5000

OFFICE USE ONLY

Withdrawal Date:	Nett Amount:	Total Bonus:	Total Payable:
Fund Option:	Amounts of Units:		
Payee:			
Date Sent:	<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YY"/>	Authorised:	