AMP

Changing your bank account details

Use this form to update your nominated Australian bank account details for direct credit payments from your Flexible Lifetime – Investments account. You'll automatically be registered for the EasyDraw facility.

These servicing facilities allow you to invest and withdraw funds by phone, email or online via **amp.com.au** using your nominated bank account. If you wish to cancel these services at any time, please contact us.

Please print in CAPITAL LETTERS and place a cross ✗ in any applicable boxes.

1. Investor details

Investment account number

Title

Date of birth

D D M M Y Y Y Y

Surname

Given name(s)

Residential address

Suburb

State

Postcode

Contact phone number

Mobile number

Email address

2. Account details

Details of account to credit

! This account will be used each time you request funds to be paid from your Flexible Lifetime – Investments account to your bank account including:

- payments using EasyDraw
- distribution payments
- payments as part of your Regular Withdrawal Plan.

Name of financial institution

Address of financial institution

Name of account holder(s)

BSB number

Account number

Issue date: 14 June 2022

Issued by ipac Asset Management Limited (ipac) ABN 22 003 257 225, AFSL No. 234655.

3. Agreement and declaration

– I declare that 'I', 'my' and 'me' also mean 'we', 'our' and 'us' respectively.
– I declare that all details on this form are true and correct.
– I have received and been given the opportunity to read the current Flexible Lifetime – Investments **product disclosure statement (PDS)**.
– By registering for EasyDraw, I agree to be bound by the terms of the Constitution(s) (as amended) and the current **PDS** when making a withdrawal from the investment option(s) comprising Flexible Lifetime – Investments.

If you are signing as a trustee:

– I warrant that, at the time of signing, I am authorised under the relevant trust deed to apply and to do all things necessary as a result of becoming a unitholder.

If you are signing under Power of Attorney:

– I verify that, at the time of signing, I had not received notice of revocation of that Power of Attorney. In the event that a certified copy of the Power of Attorney has not been previously provided, I must submit this with the completed application form.

Investor A or Company Director/Sole Director/Power of Attorney

✗

Date

D D M M Y Y Y Y

Investor B or Company Director/Sole Director/Power of Attorney

✗

Date

D D M M Y Y Y Y

Where to send this form

Mail (no stamp required), fax or email the completed form to:

Flexible Lifetime – Investments
Reply Paid 79281
PARRAMATTA NSW 2124

02 8837 7860

trustinfo@amp.com.au

Any questions?
133 267 (133 AMP)

Office/Adviser use only

Client number

Request ID

Adviser ID

NS3618 05/22