

Perpetual WealthFocus Pension Plan

Product Disclosure Statement issue number 14 dated 1 October 2022

Supplementary Product Disclosure Statement dated 15 December 2022

Perpetual Superannuation Limited ABN 84 008 416 831 AFSL 225246 RSE L0003315

Pension Plan application

Please complete this form using BLACK INK and print well within the boxes in CAPITAL LETTERS. Mark appropriate boxes with a cross like the following 🗵. Start at the left of each answer space and leave a gap between words.

Please ensure this form is fully complete and all required documentation is provided to either your financial adviser or us, so we can process your application.

1. Member details

Are you an exi	sting Perpet	ual investo	r?																
	no																		
	yes		client	numbe	r	Ц													
title Mr	Mrs	Miss	Ms	Ot	ther														
first name(s)							Ų											ų	
							_	Ш		Ш		_		Ш		L	Ш	_	Ш
last name						П	T	П	T	П		T	П	П		т	П	Т	П
occupation																			
date of birth																			
/	/				ger	nder		male					fema	ale					
Tax file number	(TFN)																		
Existing investo use the TFN						sly advis	sed u	nless	you re	eques	t us n	ot to.	If yo	ou do	not w	rish F	Perpe	tual	
If you are under for), which is ava									file n	umbe	r decl	aratio	on' fo	orm (1	for ea	ch pe	ensior	ı you	apply
Residency stat				•															
Are you an Aust	ralian reside	nt for tax p	urposes	?															
yes																			
no pleas	e specify co	untry of res	sidence.																
							Ī					Ī							

1. Member details (continued)

Residential address (mandatory) unit number street number street name suburb (if relevant) OR city state postcode country phone (business hours) phone (after hours) mobile fax email address By providing my email address, I agree to receive any information about my investment (such as transaction confirmations, statements, reports and other materials or notifications required by the Corporations Act) electronically. This may include email notifications advising me when new information regarding my investment is available for viewing online, via hyperlink or via myPerpetual. I acknowledge you may still need to send me information by mail from time to time. Postal address (if different to residential address) c/- (if applicable) po box unit number street number street name suburb (if relevant) OR city state postcode country 2. Employment status Your application cannot be processed if this section has not been completed. I am retired after having reached my preservation age (or have met another condition of release that allows access to my superannuation benefits). I have reached my preservation age but have not retired and I would like to open a 'transition to retirement' (TTR) pension within the Pension Plan.

3. Contribution/rollover details

Please refer to the Features Book for information about eligibility, including the transfer balance cap.

Source of funds being invested (select most relevant option)

retirement savings employment inc	ome business activities		sale of assets									
inheritance/gift financial investn	nents other											
	Guidi											
Transfer from WealthFocus Super Plan												
account number												
Amount to be transferred												
entire balance as a product transfer from WealthFocus Super Plan to the same investment options and allocation in WealthFocus Pension Plan												
To receive the waiver of buy/sell spreads you need to transfer to the same investment options in the same amounts as you are currently invested in WealthFocus Super Plan. Do not complete the initial investment column in the 'Investment allocation' section unless you have additional rollovers and/or contributions. If you select product transfer and have completed the initial investment column in the 'Investment allocation' section, the waiver of buy/sell spreads will apply to the transferred amounts from WealthFocus Super Plan and the investment strategy as indicated in that section will be applied only to any additional amounts received for you, which will be subject to the relevant buy/sell spreads.												
or												
partial amount \$	from		investment option									
Transfer from an existing Perpetual sup account number Amount to be transferred entire balance or partial amount \$ Transfer from a super or pension fund o Please provide the details below. You will also need indicate below the amount of your rollover.	utside Perpetual		g requested. Please									
Previous institution	Policy/Account number	Approximate amou	unt									
		\$										
		\$										
		\$										
		\$										
		\$										
	Total	\$										

We will only commence your pension after we have received all the rollovers listed above.

3. Contribution/rollover details (continued)

Please indicate below the amount of your contributions. These funds will be invested initially in the Perpetual Cash investment option in Perpetual WealthFocus Super Plan and on the same day invested in the Pension Plan according to your investment instructions in the 'Investment allocation' section.

Contribution eligibility and limits

Please refer to the WealthFocus Super Plan Features Book for information about contribution eligibility and limits. You should speak to your financial adviser about the contribution limits when considering your situation. Contributions made in excess of the limits will attract additional tax.

Contribution type	Amount	Further details
personal contribution	\$	If you are eligible and intend to claim a tax deduction on these contributions you will also need to complete 'Are you claiming a tax deduction for any personal contributions?' below.
spouse contribution	\$	
downsizer contribution	\$	You will also need to complete a 'Downsizer contribution into superannuation' form (available from the ATO).
CGT contribution	\$	You will also need to include a completed 'Capital gains tax cap election' form (available from the ATO).
personal injury payment	\$	You will also need to include a completed 'Contributions for personal injury election' form (available from the ATO).
Covid-19 recontribution	\$	You will also need to include a completed 'Notice of re-contribution of COVID-19 early release amounts' form (available from the ATO).
Total	\$	

Are you claiming a tax deduction for any personal contributions? Please refer to the WealthFocus Super Plan PDS for information about your eligibility to claim a tax deduction for your personal contributions. If no selection is made we will assume you will not be claiming a tax deduction for this amount. yes, please specify dollar amount of deduction. This is your notice to us of the amount you intend to claim as a tax deduction in relation to section 290–170 of the Income Tax Assessment Act 1997. We will deduct 15% contributions tax from the amount indicated in the next column. We will send you an acknowledgement of the amount you are claiming which you will need to keep for tax purposes. (If no amount is indicated, we will assume you are claiming the full amount as a deduction.)

By completing this section you confirm that you have read, understood and agree to be bound by the terms and conditions of the WealthFocus Super Plan PDS.

4. Features

Indicate which optional features you would like applied to your account.

Dollar cost averaging plan	yes		fortnightly	
Select your investment options in the following section Note: you cannot select both the dollar cost averaging plan and auto-rebalancing for the same account.	\$	per frequency	monthly (default) quarterly	
Auto-rebalancing				
 Note: you cannot select both the dollar cost averaging plan and auto-rebalancing for the same account. 	yes		quarterly (default)	
If you are investing in Perpetual Geared Australian investment option you must tick 'Yes' to the			half-yearly	
auto-rebalancing feature and complete the 'investment strategy' column in the following section.			yearly	
Nomination of beneficiary If you would like to nominate a beneficiary to receive your benefit on death complete the 'Nomination of beneficiary' form.	yes		no	
Nomination of reversionary beneficiary If you would like to nominate a reversionary beneficiary to receive your benefit on death complete the 'Nomination of beneficiary' form.	yes		no	
Investor myPerpetual online access	view & transact (default)		view only	
Adviser myPerpetual online access Note: your financial adviser can access information about your account online (and may extend to their authorised delegates the same level of online access you have determined for your adviser)	view & transact (default)		view only	
Investment information to be sent in the mail Note: most of your investment information is also available online through myPerpetual	online only (default)		online and mail	
Annual report to be sent in the mail Note: the annual report is also available on our website	no (default)		yes	
Marketing material I would like to receive investment education material and be informed about Perpetual's products, services and offers	yes (default)		no	

- For each optional feature you have elected, please ensure you have read and understood the relevant section in the Features Book for that feature.
- If you have nominated an optional feature above, please ensure you fill out the relevant columns in the table in the following section.

5. Investment allocation

Investment options	short code	investn	nent	pensio drawd investm for auto	averag OR inv	dollar cost averaging plan OR investment strategy				
Cook	ABP	\$ or 9	%		% o	r order ¹		%		
Cash				0/	0/					
Perpetual Cash	APCA	\$	or	%	%	or		%		
Fixed income and co	redit									
Bentham Global Income	PIPCSG	\$	or	%	%	or		%		
Macquarie Income Opportunities	PIPUBY	\$	or	%	%	or		%		
Perpetual Diversified Income	PIPDIN	\$	or	%	%	or		%		
Perpetual Dynamic Fixed Income	PIPARF	\$	or	%	%	or		%		
Schroder Fixed Income	PIPDAB	\$	or	%	%	or		%		
Vanguard Australian Fixed Interest Index	PIPVGY	\$	or	%	%	or		%		
Property & Infrastru	cture					× ×				
Lazard Global Listed Infrastructure	PIPLGL	\$	or	%	%	or		%		
Pendal Property Securities	PIPHSP	\$	or	%	%	or		%		
Vanguard Australian Property Securities Index	PIPVGP	\$	or	%	%	or		%		
Australian shares						<u> </u>				
Ausbil Australian Active Equity	PIPUBA	\$	or	%	%	or		%		
Ausbil Australian Emerging Leaders	PIPELF	\$	or	%	%	or		%		
Fidelity Australian Equities	PIPFID	\$	or	%	%	or		%		
Investors Mutual Australian Share	PIPIMA	\$	or	%	%	or		%		
Pendal Australian Equity	PIPBTA	\$	or	%	%	or		%		
Perpetual Australian Share	APAS	\$	or	%	%	or		%		
Perpetual Concentrated Equity	PIPCEF	\$	or	%	%	or		%		
Perpetual ESG Australian Share	PIPSRF	\$	or	%	%	or		%		
Perpetual Geared Australian (maximum 30%)	PIPGAF	\$	or	%	%	or		%		
Perpetual Industrial Share	APIS	\$	or	%	%	or		%		
Perpetual SHARE-PLUS Long-Short	PIPSPF	\$	or	%	%	or		%		
Perpetual Smaller Companies	APSC	\$	or	%	%	or		%		
Schroder Australian Equity	PIPSCH	\$	or	%	%	or		%		
Vanguard Australian Shares Index	PIPVGA	\$	or	%	%	or		%		

Map	Investment options	short code	investm			drawd investm for auto	n payment down and ent strategy o-rebalance	dollar cost averaging plan OR investment strategy			
Barrow Hanley Clobal Share Clo	International above		\$ or %	6		% o	r order'		%		
MFS Global Equity PIPMFG \$ 0r % % 0r % 6 Perpetual Global Allocation Alpha APSG \$ 0r % % % 0r % 6 Perpetual Global Innovation Share PIPMA \$ 0r % 0r % % 0r % 0r % 6 Platinum Asia PIPPAF \$ 0r % % 0r % 0r % 6 Platinum Asia PIPPAF \$ 0r % 0r	Barrow Hanley		\$	or	%	%	or		%		
Perpetual Global Allocation Alpha	Magellan Global	PIPAAI	\$	or	%	%	or		%		
Perpetual Global PIPINA S	MFS Global Equity	PIPMFG	\$	or	%	%	or		%		
Innovation Share		APSG	\$	or	%	%	or		%		
Platinum International PIPPLI \$ 0r % % 0r % % 0r % % No T. Rowe Price Global Equity \$ 0r % % 0r 0r		PIPINA	\$	or	%	%	or		%		
International PIPPLI S		PIPPAF	\$	or	%	%	or		%		
Equity		PIPPLI	\$	or	%	%	or		%		
International Shares PIPVIS \$		PIPTRP	\$	or	%	%	or		%		
International Shares PIPVGI \$	International Shares Index	PIPVIS	\$	or	%	%	or		%		
BlackRock Diversified ESG Stable PIPBGC \$ Or % % % Or % % Stable Perpetual Conservative Growth APCG \$ Or % % % Or % % Morningstar Growth APDG \$ Or % % Or % Morningstar Growth APBG \$ Or % % Or % Morningstar Growth APBLG \$ Or % % Or % % Or % % Or % Schroder Sustainable Growth PIPSCG \$ Or % % Or % % Or % % Or % Schroder Sustainable Growth PIPSCG \$ Or % % Or % % Or % % Or % Schroder Sustainable Growth PIPSCG \$ Or % % Or % % Or % % Or % Schroder Sustainable Growth PIPSCG \$ Or % % Or % % Or % % Or % Schroder Sustainable Growth PIPSCG \$ Or % % Or Or	International Shares Index (Hedged)		\$	or	%	%	or		%		
Diversified ESG		rvative									
Conservative Growth Diversified – balanced Perpetual Diversified Growth Perpetual Diversified Real Return PlackRock Diversified ESG Growth BlackRock Tactical Growth Morningstar Growth Real Return APBLG Schroder Sustainable Growth PIPSCG APDG Or Or Or Or Or Or Or Or Or O	Diversified ESG	PIPBGC	\$	or	%	%	or		%		
Perpetual Diversified Growth Perpetual Diversified Real Return PIPDRR Perpetual Diversified PIPDRR Perpetual Diversified PIPDRR Perpetual Diversified PIPDRR Perpetual Diversified PIPDRR PIPDR		APCG	\$	or	%	%	or		%		
Growth Perpetual Diversified Real Return PIPDRR \$ or % % % or % % PIPDRR \$ prepetual Diversified – growth BlackRock Diversified ESG Growth PIPBGG \$ or % % or % or % or % or % or % % or % or % % or % % or % or % or % % or % or % % or % or % or % or % % or % or % or % or % or % or % % or %	Diversified – balance	ed									
Real Return Diversified – growth BlackRock Diversified ESG Growth BlackRock Tactical Growth APBLG APBLG APBG Tor Tor Tor Tor Tor Tor Tor To		APDG	\$	or	%	%	or		%		
BlackRock Diversified ESG Growth BlackRock Tactical Growth PIPUBB \$ or % % or % or % or % %	Real Return		\$	or	%	%	or		%		
Diversified ESG Growth BlackRock Tactical Growth PIPUBB \$ or % % or % or % %		1					× × ×				
Growth PIPOBB	Diversified ESG	PIPBGG	\$	or	%	%	or		%		
Real Return Perpetual Balanced Growth Schroder Sustainable Growth APBG Or Or W Or Or		PIPUBB	\$	or	%	%	or		%		
Growth APBG		APBLG	\$	or	%	%	or		%		
Sustainable Growth		APBG	\$	or	%	%	or		%		
Total 100% 100% 100%		PIPSCG	\$	or	%	%	or		%		
	Total				100%	100%		10	00%		

¹ You cannot specify an order if you have auto-rebalancing.

6. Pension payment details (must be completed)

I would like to receive my pension pay	ments:											
monthly	quarterly	half yearly		yearly								
I would like my pension payment amou	unt to be:											
minimum maximum (only applicable to TTR pensions) or												
specify an amount (before tax) of: \$ pa or \$ per payment												
I would like my specified payments to automatically increase each year (not applicable to TTR pensions):												
no yes, by an amount of % yes, in line with CPI												
I would like to receive my first pension	payment on the (please choo	ose only one):										
27th of		(month)		(year)								
(subject to all documents being receiv	ed five working days in advar	nce)										
7. Payment bank account details Please provide your bank account into which all payments are deposited. The account can be in your name or a joint account of which you are one of the account holders. Bank account												
financial institution												
branch												
BSB -	account number											
account name												

8. Authorised representative

Would you like to appoint an authorised representative? Before appointing an authorised representative, refer to the Features Book.

no please go to section 9												
yes please complete the details below.												
myPerpetual online access for my authorised representative												
view and transact (default) or view only												
authorised representative details:												
first name(s)												
last name												
po box unit number street number												
street name												
suburb (if relevant) OR city												
state postcode country												
signature of authorised representative	date / /											
9. Member advice fee Complete this section if you have agreed with your financial adviser to have an ongoing and/or one-off member advice fee deducted.												
For new ongoing fee arrangements, the fee will begin on the business day we are paid monthly by the withdrawal of units from the account above. A percent balance of your investment over the month.												
The maximum total member advice fee payable in any year is 3% per annum if your account balance falls making the fee greater than 3%pa, the ongoing fe												
ongoing member advice fee (including GST less any RITC available to the	he Fund)											
% per annum or	per month											
The ongoing member advice fee is to be paid:												
as a deduction pro rata across my investment portfolio (default) or												
from my	investment option											
Based on your account balance, an estimate of the fees payable over a 12 mont	h period is \$											
If you haven't made a nomination on how the fee should be deducted, or if the to cover the fee, the ongoing fee arrangement will be deducted proportionately f												
ongoing fee arrangement anniversary day Enter the date on which you received a Fee Disclosure Statement or fir the same, or prior to, the date you signed the form in section 12	st consented to the ongoing fee. This date must be											
The ongoing fee arrangement will not be accepted if this section is not comp The anniversary day is each anniversary of the date entered above.	pleted.											

If you do not renew your consent to the ongoing fee, we will stop deducting it from your account 150 days after the anniversary day,

however you may withdraw or vary your consent earlier than this date.

One-off advice fees are paid by redeeming units from the account specified above and making a payment to your financial adviser though their licensee or dealer group.

Important: Units are redeemed from your account on the day we receive this consent form and the advice fee is paid to your financial adviser the following month. You may withdraw your consent up until the end of the month in which you provide this form. If you do so, the advice fee will be credited to your account at the unit price effective on the date you withdraw your consent. Any instruction received after 3pm will be processed on the following business day.

The maximum one-off fee is 3% of your account balance.

one-off member advice fee (including GST less any RITC available to the Fund)	
\$	
The one-off member advice fee is to be paid:	
as a deduction pro rata across my investment portfolio (default) or	
from my	investment option.
Services received - these must fall within the range of services listed below	

Advisers are able to charge advice fees for the following services provided in relation to your Perpetual WealthFocus Pension Plan account:

- account establishment and commencement
- periodic review of your account
- strategic superannuation advice
- management and administration of your account
- superannuation investment portoflio advice
- superannuation contribution strategy
- insurance in superannuation strategy
- superannuation withdrawal advice and management

should be entered on the application form. For example, for a financial adviser to receive a net fee of \$1,000, the amount entered on the application form should be \$1,025.
10. Special instructions

For a financial adviser to receive a net (after GST) fee of a specified amount, multiply this amount by 1.025 to determine the amount that

Perpetual can refuse a request to pay fees under an ongoing fee arrangement or a one-off fee.

11. Financial adviser use only

Financial adviser details and member advice fee

Where an ongoing member advice fee has been agreed with the member (see section 9 of this application form):

- I will promptly notify Perpetual in writing if I am no longer entitled to receive the member advice fee.
- I acknowledge that where agreed services are not provided to the member, Perpetual reserves the right to claw back fees.
- I consent to Perpetual acting as my agent to collect any member advice fee agreed in section 9 of this application form.
- I confirm that the services to be provided to the account holder for the ongoing fee arrangement or one-off fee arrangement fall within the range of services listed, for which advisers are able to charge member advice fees.

financial adviser name																	Ш
phone (business hours)		Щ		Ц	1	ļ			(afte	phone er hours)			_	ļ			Ш
mobile	Щ	Ш	Щ	Щ		Ţ				fax	Щ		Ц	4			Ш
postal address	Ш	Ш						Ш	Ш				Ш		Ш		Ш
		Ш					L	Ш	Ш		Ш	L	Ш	┸			Ш
email																	Ш
AFSL licensee name	Щ	Щ					I	Ш	Ш			I		I		I	
AFSL number	Ш	Ш															
either Perpetual adviser number																	
or dealer group								Ш									
dealer branch																	
financial adviser signature										date	П	/	I		/		П
IL GN	/	/	(Gro	oup)													
IL AN	/	/	(Adv	viser)										(ADVISE STAME		
IL CN	/		/	(Client)													

12. Declaration and signature (must be completed)

I declare and agree that:

- I have read and understood the Product Disclosure Statement (PDS) and any relevant incorporated material for WealthFocus Pension Plan and confirm I accept this offer in Australia
- all of the information provided in my application is true and correct
- I have read, understood and agree to be bound by, any additional restrictions in the PDS and any incorporated material and I agree to be bound by the provisions of the Trust Deed (as amended from time to time)
- I have read and understood the privacy disclosure as detailed in the Features Book. I consent to my personal information being collected, held, used and disclosed in accordance with the privacy disclosure. I consent to Perpetual disclosing this information to my financial adviser (named in this form) in relation to the investments described in this form. Where the financial adviser named in this form no longer acts on my behalf, I will notify Perpetual of the change
- if I have received the PDS from the internet or other electronic means that I received it personally or a print out of it, accompanied by
 or attached to this application form
- If applicable, in the case of contributions, that I have:
 - read and understood the contribution eligibility rules in the WealthFocus Super Plan Features Book and that I am eligible to make or have contributions made for my benefit
 - met a condition of release
 - not yet lodged my income tax return for the current year of income and not yet commenced a superannuation income stream based in whole, or part, on the contributions for which I am claiming a personal tax deduction
- where I have agreed to pay my financial adviser a member advice fee, this fee is for financial advice received relating to my investment in the Pension Plan
- I have provided my financial adviser with acceptable identification documentation as described in the following section OR I am not
 investing through a financial adviser, and therefore have included certified copies of acceptable identification documentation as described
 in the following section.

I acknowledge and agree that:

- If I do not renew my consent to the ongoing fee arrangement, the member advice fee specified in Section 9 of this form will be deducted
 for a maximum of 150 days after the anniversary date of the ongoing fee arrangement. Consent may be withdrawn or varied at any
 time during the ongoing fee arrangement by notice in writing to my financial adviser or Perpetual.
- The ongoing fee arrangement may continue where Perpetual is advised by the outgoing AFS licensee or financial adviser that the
 services under the ongoing fee arrangement are to be provided by a new AFS licensee or financial adviser and that I have consented
 to that transfer.
- the information contained in the PDS is not investment advice or a recommendation that the Pension Plan and/or any investment option is suitable having regard to my investment objectives, financial situation or particular needs
- Perpetual is required to provide information, including my TFN, to the Australian Taxation Office (ATO) and will obtain information from the ATO in relation to my superannuation account
- Perpetual may be required to pass on my personal information or information about my investment to the relevant regulatory authorities, including for compliance with income tax law and the Anti-Money Laundering and Counter-Terrorism Act 2006 or associated regulation and any tax-related requirements for tax residents of other countries
- Perpetual may contact me where required by using the email address provided on the application form. I will notify Perpetual of any
 change to my email address. I understand that failure to advise such a change may result in me not receiving correspondence relating
 to my investment
- neither the Trustee nor any other company in the Perpetual Group guarantees the repayment of capital or the performance of the Pension Plan or any investment option.

Perpetual Geared Australian investment option (You must read and tick the box below if you have chosen to invest in the Perpetual Geared Australian investment option) I have thoroughly read the 'Understanding investment risk' section, 'Gearing risk' section and 'Investment limits' section of the Features Book. I understand the greater risks associated with my selection of this investment option and that it has a suggested investment timeframe of seven years or more. I acknowledge and accept that, if the value of my investment in this investment option has risen above or fallen below my nominated percentage allocation (or the default percentage allocation if I do not make a nomination) at my nominated review date (or the default frequency if I do not make a nomination) it will be automatically rebalanced to my nominated percentage allocation (or default percentage allocation) across my investments. I acknowledge that the buy/sell spread will apply to this rebalancing transaction. Before you sign this application form, the Trustee or financial adviser is obliged to give you a PDS (which is a summary of important information relating to the Pension Plan). The PDS will help you to understand the product and decide if it is appropriate to your needs. signature of member print name

Important notes:	Final checklist			
 If signing under power of attorney, the attorney certifies that he or she has not received notice of revocation of that power. The power of attorney, or a certified copy, must be sent to Perpetual, if not previously provided. 	Have you Completed all sections of your application form?			
 Perpetual has the absolute discretion to accept or reject any application. 	Signed your application form?			
 Members should retain a copy of the PDS during the life of this PDS. 	If required, completed a tax file number declaration form?			
A business day is a working day for Perpetual in Sydney.	Provided your financial adviser certified copies of your identification material? OR if you don't have a financial adviser have you enclosed certified copies of your identification material? Please send your completed application form to: Reply Paid 4171 Perpetual WealthFocus Pension Plan GPO Box 4171			
	Sydney NSW 2001			

13. Identification verification (must be completed)

The identity documentation requested below is required to meet our obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006. **We cannot process your application without this information.**

Identity documentation

Please provide a document from Part I. If you do not have a document from Part I, please provide the documents listed in Part II OR Part III.

- If you are applying directly with Perpetual You will need to provide a certified copy of the document(s) with your application.
- If you are lodging this application through a financial adviser You may provide a certified copy with your application OR have your financial adviser sight an original or certified copy of your document(s) and complete the 'Record of verification procedure' section in this form.

PART I – Primary ID documents
Provide ONE of the following:
current Australian State/Territory driver's licence containing your photograph
Australian passport (current or a passport that has expired within the preceding 2 years is acceptable)
current card issued under a State or Territory law for the purpose of proving a person's age containing your photograph
current foreign passport or similar travel document containing your photograph and signature
OR
PART II – should only be completed if you do not own a document from Part I
Provide ONE of the following:
Australian birth certificate
Australian citizenship certificate
concession card such as a pension, health care or seniors health card issued by Services Australia (excludes Medicare cards)
AND provide ONE valid document from the following:
a document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to you and contains your name and residential address
a document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by you to the Commonwealth (or by the Commonwealth to the individual), which contains your name and residential address.
a document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to your address or to you (the document must contain your name and residential address)
OR
PART III – should only be completed if you do not own document(s) from Part I OR Part II
BOTH documents from this section must be provided
foreign driver's licence that contains a photograph of you and your date of birth
national ID card issued by a foreign government containing your photograph and your signature

Any documents written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

How to certify your documents

In accordance with the AML Rules, a certified copy means a document that has been certified as a true and correct copy of an original document by a person listed below, including all persons described in the Statutory Declarations Regulations 2018 (Cth).

To create a certified copy, one of the persons listed below must write the following on the copy of the document.

'I, [full name], [category of persons as listed below], certify that this [name of document] is a true and correct copy of the original. [signature and date]'

- An Australian bank, building society, credit union or finance company officer with a minimum of 2 years continuous service
- A fellow of the National Tax and Accountants' Association
- An Australian judge of a court, Justice of the Peace or magistrate
- An Australian legal practitioner
- A notary public, patent or trade marks attorney
- An Australian medical practitioner including dentist, nurse, midwife, optometrist, pharmacist, physiotherapist, chiropractor, psychologist, occupational therapist or veterinary surgeon
- A permanent employee or agent of the Australian Postal Corporation with a minimum of 2 years continuous service
- An Australian federal, state or territory police officer
- An architect
- A teacher employed on a full-time basis at an Australian school or tertiary education institution

- An accountant who is a full member of the Chartered Accountants Australia and New Zealand, CPA Australia, the Institute of Public Accountants or the Association of Taxation and Management Accountants
- An Australian Consulate or Diplomatic Officer
- A registered migration agent
- An officer or authorised representative of an Australian Financial Services Licence holder with a minimum of 2 years continuous service with one or more licensees
- A financial adviser or financial planner
- A person in a country other than Australia who is authorised by local law to administer oaths or affirmations or to authenticate documents (please list the local law providing this authority when certifying the document

IMPORTANT: Please ensure that you have either

- · enclosed certified copies of your identity documents OR
- agreed that your financial adviser will complete the 'Record of verification procedure' below.

Record of verification	procedure (Financial	adviser use only)						
This section is to be used I documentation.	by financial advisers when a ı	record of verification is	provided, rather than certific	ed copies of identity				
ID document details	Document 1		Document 2					
verified from	original	certified copy	original	certified copy				
document name/type								
document issuer								
issue date								
expiry date								
document number								
accredited English translation	N/A	sighted	N/A	sighted				
 By completing and signing this record of verification procedure I declare that: an identity verification procedure has been completed in accordance with the AML/CTF rules, in the capacity of an AFSL holder or their authorised representative and the information provided in relation to residency status for tax purposes is reasonable considering the identity documentation provided. 								
AFS licensee name			AFSL number					
representative/ employee name			phone number					
signature			date verification completed					



Perpetual WealthFocus Pension Plan

Product Disclosure Statement issue number 14 dated 1 October 2022 Supplementary Product Disclosure Statement dated 15 December 2022

Perpetual Superannuation Limited ABN 84 008 416 831 AFSL 225246 RSE L0003315

Nomination of beneficiary

Use this form to make a nomination of beneficiary for your superannuation benefits to be paid upon your death. This is an optional feature.

Please complete all pages of this form in black ink using BLOCK letters. Mark boxes with an (X) where applicable.

1. Personal details

Title Mr Mrs Miss Ms other	If you have more than one account held in Perpetual WealthFocus Super Plan and Pension Plan, please list the account numbers that this nomination applies to below.
first name(s)	This nomination is to apply to all my existing Perpetual WealthFocus Super Plan and Pension Plan accounts, or This nomination applies to the account numbers listed below:
last name	This nomination applies to the account numbers listed below.
	A C
client number	A C
	A C

2. Nomination

Perpetual offers the following options for nominating a beneficiary to receive your superannuation benefit in the event of your death:

- A reversionary beneficiary nomination where your pension will generally revert to your nominated beneficiary automatically on your death provided they are a 'dependant' for tax purposes at that time.
- A valid binding nomination is a legal instruction, whereby the Trustee is legally obligated to pay your superannuation benefits
 according to the binding nomination.
 - A binding non-lapsing nomination does not expire (it will continue until further instructed).
 - A binding lapsing nomination is valid for three years after it was signed by the member. A new form must be signed and
 delivered to the Trustee if you wish to continue your nomination. If no valid nomination is made Perpetual will pay your benefit
 to a dependant(s) or your Legal Personal Representative. Your binding lapsing nomination will also cease to have effect if you
 subsequently marry, remarry or divorce.

To be effective, you must sign your binding nomination before two witnesses who are each at least 18 years old, and who are not nominated as a beneficiary.

A non-binding nomination is simply your recommendation to the Trustee as to whom it may pay your superannuation benefit. It
is not binding on the Trustee, and the Trustee will use discretion when determining who to pay benefits to. This type of nomination
does not require witness signatures.

Nomination type: (only choose one)	reversionary beneficiary	binding non-lapsing	binding lapsing	non-binding
()				

IMPORTANT – before you complete the following table:

- If this *nomination requires witnessing*, please post this form as we need an **original form please do <u>not</u> send via email**.
- To establish a valid nomination ensure <u>no alterations</u> are made on this form.
- Column D in the table (Share of death benefit) must total 100%.
- You can nominate your legal personal representative and/or one or more of your dependants as defined under Superannuation Law.

If you have insufficient room to list all beneficiaries, please complete an additional 'Nomination of beneficiary form' and attach to this form.

A) Nominated beneficiary (full name)	В) І	B) Relationship to you		C) Date of birth		D) Sha	are of death it
Legal Personal Representative (your estate) If you have nominated 100% of the benefit allocation to your Legal Personal Representative do not complete any further nominations.	N/A		N/A			%	
first name(s)		spouse		/	1		%
		child					
last name		interdependent					
		financial dependant					
first name(s)		spouse		/	1		%
		child					
last name		interdependent					
		financial dependant					
first name(s)		spouse		/	1		%
		child					
last name		interdependent					
		financial dependant					
					TOTAL		100%

3. Declaration

By making the nomination in this form, I understand that I must send this form to the Trustee.

Reversionary beneficiary nomination: I understand this nomination is generally irrevocable.

Binding and non-binding nominations:

- I understand that when this form is accepted by the Trustee, it will replace and revoke any existing nominations. I understand that I can revoke, amend, or make a new beneficiary nomination by completing another form.
- Where I have made **binding nominations**, I direct the Trustee to distribute the benefit payable to me in the event of my death in accordance with this form. I understand this nomination will be binding on the Trustee only if validly completed. I agree that the Binding Benefit Nomination Rules in the trust deed apply to my nomination.
- Where I have made **non-binding nominations**, I recommend the Trustee exercise discretion to distribute the benefit payable to me in the event of my death by considering the beneficiaries named in this form. I understand this nomination is not binding on the Trustee.

Signature of member (in black ink)

Note: This form cannot be signed under Power of Attorner	Note:	This form	cannot be	sianed	under	Power	of	Attornev
--	-------	-----------	-----------	--------	-------	-------	----	----------

full name	declaration date
	/ /

Witness declaration (required for all binding nominations and where an existing binding nomination is being revoked or replaced with a non-binding nomination)

Witness 1 I declare that I am over the age of 18 and this nomination was signed by the member in my presence and the presence of the other witness on the declaration date.	Witness 2 I declare that I am over the age of 18 and this nomination was signed by the member in my presence and the presence of the other witness on the declaration date.						
full name	full name						
date*	date*						
*In order to make a valid nomination, the witness date and declaration date MUST be the same.	*In order to make a valid nomination, the witness date and declaration date MUST be the same.						
IMPORTANT – For nominations that require witnessing:							
We require an original form – only post this form, please do no	ot send via email.						
This form must be signed by the member and both witnesses a	at the same time.						
Checklist							
Please note this form cannot be accepted if alterations are many of beneficiary form'.	ade. In the event of an error please complete a new 'Nomination						
To ensure that your nomination is processed correctly, please	e check you have:						
completed all of your personal details and your beneficiaries'	details						
in section 2, column D (Share of death benefit) written amounts that total to 100%							
signed and dated the declaration							
your two witnesses' completed details and signatures (where	required – see above)						
Nominations requiring witnessing must be mailed to: Reply Paid 4171 Perpetual WealthFocus Pension Plan GPO Box 4171 Sydney NSW 2001	Nominations not requiring witnessing can also be emailed to: investments@perpetual.com.au						

Beneficiary nominations

To receive the death payment, your nomination must be one of the following categories at the date of your death:

- your spouse (legal, same sex or opposite sex de facto)
- your child (including an adopted, step or ex-nuptial child or a child of your spouse)
- in an interdependency relationship with you. An interdependency relationship exists between two people if they have a close personal relationship, live together and one or each of them provides the other with financial support, domestic support and personal care. If a close personal relationship exists but the other requirements for interdependency aren't satisfied because of a physical, intellectual or psychiatric disability, then there is also an interdependency relationship
- a person who is wholly or partially financially dependent on you
- your Legal Personal Representative (LPR). Your LPR is a person
 who is the executor of your will or an administrator of your estate.

Your Privacy

Privacy laws apply to our handling of personal information.

We will collect, use and disclose your personal information in accordance with our privacy policy. You have a right to seek access to information which we hold about you, although there are some exceptions to this.

Our privacy policy is publicly available at our website or you can obtain a copy free of charge by contacting us.



Perpetual WealthFocus Pension Plan

Product Disclosure Statement issue number 14 dated 1 October 2022

Supplementary Product Disclosure Statement dated 15 December 2022

Perpetual Superannuation Limited ABN 84 008 416 831 AFSL 225246 RSE L0003315

Transfer authority

1. Applicant details

You must complete a separate transfer authority for each fund you are transferring from.

title	Mr	Mrs Miss	s Ms	other		date of birth	/	/	
first name(s)									
last name							ш		Ш
tax file number (TFN) ¹	1 You are	not obliged by law	to disclose yo	our TFN, but th	ere may be tax co	onsequences if you do	o not provide it.		
gender	male	female			·				
phone (business hours)					phone (afte	er hours)		П	
phone (mobile)		ш							
residential address									
suburb (if relevant) or city						state	posto	ode	Ш
country	If the end	draga hald by	tour (EDOM)	formal in aliffic		urrant address nice		oile below	Ш
previous address	ii the ad	aress held by	your FROM	Tuna is aine	erent to your ct	urrent address, ple	ease give del	alls below.	
suburb (if relevant) or city						state	posto	code	
country									

2. Fund details

FROM (old fund)		TO (new fund)				
fund name		fund name	Perpetual WealthFocus			
			Superannuation Fund – Pension			
fund postal address		fund phone number	1 8 0 0 0 2 2 0 3 3			
		client number (if known)				
fund phone number		account number (if known)				
membership or account number		Australian business number (ABN)	4 1 7 7 2 0 0 7 5 0 0			
Australian business number (ABN)		Unique superannuation identifier	P E R 0 4 0 3 A U			
Unique superannuation identifier						
Transfer amount						
If you have multiple a	ccount numbers with this fund, you must com	plete a separate form for e	each account you wish to transfer.			
I authorise the transfe	er of the total value or partial value					
	oove superannuation fund or policy to: uation Limited, Perpetual WealthFocus Pe	nsion Plan, GPO Box 417	71, Sydney NSW 2001.			
3. Authorisation	on					
By signing this request	form I:					
 declare I have fully r 	ead this form and the information completed	is true and correct				
•	my superannuation provider for information transfer may have on my benefits, and do no					
consent to my TFN I	peing disclosed for the purposes of consolidation	ating my superannuation be	enefits			
 discharge the super 'TO' fund. 	annuation provider of my 'FROM' fund of all f	urther liability in respect of	the benefits paid and transferred to my			
I request and consent t give effect to this transf	o the transfer of superannuation as describeder.	d above and authorise the	superannuation provider of each fund to			
first name(s)						
last name						

date

signature



Perpetual WealthFocus Pension Plan

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Compliance letter

This letter can be provided to the fund you are rolling over from in order to confirm that Perpetual WealthFocus Pension Plan is part of a complying fund.

To Whom It May Concern,

Perpetual WealthFocus Superannuation Fund

Australian Business Number (ABN): 41 772 007 500

RSE Registration No. R1057010

Unique Superannuation Identifier (USI): PER0403AU (Perpetual WealthFocus Pension Plan)

Perpetual WealthFocus Superannuation Fund (the Fund) is a complying superannuation fund constituted under a trust deed dated 26 May 1995 (as amended) (Trust Deed). The Trustee of the Fund is Perpetual Superannuation Limited.

The Trust Deed of the Fund complies with the preservation and portability standards currently imposed on complying superannuation funds under the Superannuation Industry (Supervision) Act 1993 and Regulations.

Yours faithfully

Directors

Perpetual Superannuation Limited

Perpetual Superannuation Limited

ABN 84 008 416 831 AFSL 225246 RSE L0003315

Level 18, Angel Place 123 Pitt Street GPO Box 4171 Sydney NSW 2001 Australia

DX 365 Sydney

www.perpetual.com.au

Client Services
Phone 1800 022 033