## **Asteron Traditional Capital Guaranteed Fund Continued Investment form**OM14



Use this form to transfer an investment in the Asteron Traditional Capital Guaranteed Fund between Brighter Super and/or Asteron super accounts.

The Asteron Traditional Capital Guaranteed Fund is closed to new members. Members who hold an investment in the Asteron Traditional Capital Guaranteed Fund are able to add to that investment and/or move the investment between Brighter Super and Asteron super accounts.

You must attach this form to a rollover request or an application form for the account you want to move this investment to.

Personal Details	Brighter Super respects your privacy. <i>I</i>	All personal informatior	collected is protected in line with B	righter Super's Privacy Policy.
Member number	Account number	Given nam	e/s	
Surname		L		Date of birth
Email			Phone number	
Residential address				
Suburb/town			State	Postcode
Postal address (if different to above)			State	Postcode
1 Your Aster	on Traditional Ca	apital Gua	ranteed Fund ir	nvestment(s)
Where is the Asteron Trac	ditional Capital Guaranteed	l Fund investmer	nt you want to move?	
Account number:				
Where do you want to mo	ove part or all of this Astero	on Traditional Ca	pital Guaranteed Fund in	vestment to?
Please move part or a	all of this Asteron Tradition	al Capital Guaraı	nteed Fund investment to	a new account; or
Please move part or a	all of this Asteron Tradition	al Capital Guaraı	nteed Fund investment to	the below account details
Account number:				
Product name:				

2 Transfer amount					
How much do you want to transfer from this investment?					
☐ I would like to transfer the partial amount of: \$ ☐, ☐ ☐, ☐ ☐					
☐ I would like to transfer the full amount.					
Please note: If you transfer the full amount from your existing account, you will not be able to investments in the Asteron Traditional Capital Guaranteed Fund investment in that account. You investment in the Asteron Traditional Capital Guaranteed Fund in the account to be able to make in the Asteron Traditional Capital Guaranteed Fund investment to that account in the future.	ou must retain an				
Please tick (✓) the appropriate option below:					
☐ I have attached an application for the new account and a rollover request to move funds to the new account; or					
☐ I have attached a rollover request to move funds to my existing account as nominated above.					
3 Additional investments					
If you are contributing additional amounts to be invested in the Asteron Traditional Capital Gu specify the additional amount to be invested. This will be in addition to the amount you have rabove.  Additional investment amount: \$	nominated to transfer				
4 Member Declaration					
I Declare that:					
<ul> <li>I request Brighter Super transfer my Asteron Traditional Capital Guaranteed Fund investment between my eligible accounts, as nominated in Section 1.</li> </ul>					
<ul> <li>I understand Brighter Super will not accept my application if it is not fully complete, does not have attached the required form or nominates an account not eligible to hold or transfer an Asteron Traditional Capital Guaranteed Fund investment.</li> </ul>					
<ul> <li>I understand that if I transfer my total investment in the Asteron Traditional Capital Guaranteed Fund to my new account, I may not be eligible to make new or additional investments in the Asteron Traditional Capital Guaranteed Fund in that account in the future.</li> </ul>					
• I have read and understand the investment information about the Asteron Traditional Capital Guaranteed Fund investment available at <a href="https://www.brightersuper.com.au/investments/investment-options">www.brightersuper.com.au/investments/investment-options</a> .					
• I am aware that if required, I can contact Brighter Super for more information before comp	oleting this form.				
Signature	Date signed				
	/ /				
Please sign in blue or black pen - Brighter Super does not accept digital signatures on this for	m.				

## 5 Power of Attorney Signature

Complete this section if you are signing this form on behalf of the member in your capacity as the member's attorney.

By signing this form you are declaring that:

- you are nominated as an attorney on the member's Power of Attorney document and are authorised to act on the member's behalf for financial matters; and
- to the best of your knowledge and belief, your appointment under the Power of Attorney document has not been revoked or otherwise withdrawn.

If more than one attorney has been appointed, all attorneys will need to print their name, sign and date the form unless authorised to act severally.

Attorney 1	Signature	Date signed			
		/ /			
Attorney 2	Signature	Date signed /			
Attorney 3	Signature	Date signed			
Attorney 4	Signature	Date signed /			
Please sign in blue or black pen - Brighter Super does not accept digital signatures on this form.					
Please (✓) one of the options below:					
☐ I have attached valid Power of Attorney documentation. ☐ I have previously supplied a valid Power of Attorney document to Brighter Super.					

Now you have completed this form and signed the declaration, please send it to us by:

**Preferred Method** 

Website (Secure file upload)

brightersuper.com.au/contact-us

**Alternative Options** 

Email (scanned copy) membership@brightersuper.com.au Post Brighter Super GPO Box 264

