



# MANAGED FUNDS - DECEASED ESTATE TRANSFER FORM - BENEFICIARIES

## SECTION 3 - BENEFICIARY DETAILS

Complete the details of the beneficiary (beneficiaries) to whom the holding is being transferred.

Name																								
Street																								
Suburb													State			Postcode								
Country													Date of Birth											
Tax File Number					(optional)																			
Phone					Mobile																			
Email																								
@																								

Please attach details and certified identification documentation for other beneficiaries where they wish to hold the investment as joint investors.

Where there are multiple beneficiaries and they wish to open separate investments, rather than hold an investment as a joint investor, we will need to receive separately completed forms for each beneficiary and certified identification documentation for each beneficiary.

## SECTION 4 - TRANSFER OF INVESTMENT INSTRUCTIONS

As executor(s)/ legal personal representative(s) of the deceased's estate, I/we request transfer of the following investment held by the deceased to the nominated beneficiary (beneficiaries):

Name of managed fund	Units to the \$ value of	Number of units	All units
Balanced Trust	\$		
Smaller Companies Trust	\$		
Larger Companies Trust	\$		
Income Trust	\$	OR	OR
International Equities Trust	\$		
Property Trust	\$		
Climate Advocacy Fund	\$		

## DISTRIBUTION INSTRUCTION DETAILS

Place an 'X' to indicate how distributions of income are to be made (where no distribution method is specified, distributions are reinvested)

Name of managed fund	Re-invest	Direct deposit
Balanced Trust		
Smaller Companies Trust		
Larger Companies Trust		
Income Trust		OR
International Equities Trust		
Property Trust		
Climate Advocacy Fund		

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## Details for direct deposit of income

To have income directly deposited into your account, please complete the following details (this must be an account in your name):

Account name														
Account number					BSB			Bank						

## SECTION 5 - SIGNATURE OF EXECUTOR(S)/LEGAL PERSONAL REPRESENTATIVE

I declare that:

- I am authorised to complete this transfer; and
- the information given on this form is true and correct.

Name of signatory													
Signature							Date						
Name of signatory													
Signature							Date						

## SECTION 6 - SIGNATURE OF BENEFICIARY (BENEFICIARIES)

I/we, being the above named beneficiary (beneficiaries), hereby agree to be bound by the provisions of the constitution and the Product Disclosure Statement (PDS) applicable to the investment (available from [www.australianethical.com.au](http://www.australianethical.com.au) or by phoning 1800 021 227). If signed under a Power of Attorney, the Attorney declares that they have no notice of revocation of the Power. A certified copy of the Power of Attorney should be attached to this document.

Name of signatory													
Signature							Date						
Name of signatory													
Signature							Date						
Name of signatory													
Signature							Date						

## SENDING THE FORM

**You must post this form, do not fax or email.**

- **Post** the completed form to:  
**Australian Ethical Investment**  
**c/o Boardroom Pty Limited**  
**GPO Box 3993**  
**Sydney NSW 2001**