

Issued 13 March 2020 Fund ABN 32 367 272 075 | USI 32 367 272 075 151

INVESTMENT SWITCH FORM

This is the form you should fill out to switch between investment options with Grosvenor Pirie Super.

You can find detailed information about Grosvenor Pirie Super in our Product Disclosure Statement (PDS), Additional Information Booklet, Insurance Guide, Financial Services Guide and Privacy Policy, all of which can be obtained from www.gpml.com.au or on request by phoning (02) 83555149.

This form must be posted to Grosvenor Pirie Super, PO Box 1282, Albury NSW 2640

Section 1	Personal details				
Given Name(s)					
Surname					
Member numb	er				
Date of Birth					
Gender					
Phone number					
Email address					
Section 2 Your investment choice					
Please read the Product Disclosure Statement, Additional Information Booklet and other relevant information available at www.gpml.com.au before making your selection.					
Please select the option you wish to switch to below, please note, in making a selection your entire balance with Grosvenor Pirie Super will be transferred to your selection as well as all future contributions.					
Grosver	Grosvenor Pirie Conservative Investment Strategy				
Grosver	Grosvenor Pirie Balanced Investment Strategy				
Grosver	Grosvenor Pirie Growth Investment Strategy				

In most cases, your request will be processed within 5 business days Once you submit your investment switch request, it cannot be revoked.



Section 3 Declaration and Signature

By completing this form I declare that:

- I understand that this switch will be subject to the buy/sell spread of the relevant investment options with fees as set out in the PDS.
- I understand that this form cannot be revoked once received by Grosvenor Pirie Super.
- I have made my decision after careful consideration of my circumstances and reading the PDS, Additional Information Booklet and other investment information available at www.gpml.com.au
- I confirm the details I have provided above are correct
- I acknowledge that the Trustee cannot provide me with financial advice about the consequences of switching my investment option and that I should consult an appropriately qualified adviser for such advice.
- I understand that when this form is submitted my entire account balance will be switched to the investment option I have chosen.

x		
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Signature	Date	·