

Investment Choice Form - Super Member

 You can now make your investment choice online, using the LESF member login at www.lesf.com.au.

(if you require a login, please call the Member Services team on 1800 359 686)

- Complete this form if you would like to change your investment option.
- Please complete and return this form to: LESF Super, PO Box 1282, Albury NSW 2640

Please write in BLOCK letters and use a BLUE or BLACK pen. This request will be invalid if unsigned or incomplete.

Section 1: Member Details (Please complete in full)

Member Number			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<i>(This can be found on your Member Statement)</i>
Mr/Mrs/Ms/Miss		Surname	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Given Names			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Number		Street Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb		State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone (daytime)		Mobile	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 2: Investment Choice

	<input type="checkbox"/> Option 1	<input type="checkbox"/> Option 2	
Select either Option 1 or Option 2 by placing an X in the appropriate Option's box, and then complete the action required under that Option	If you would like your entire current balance, and any future transactions allocated in the same way, then use this column only	If you would like your current balance, and any future transactions allocated in a different way, complete both of these columns	
		Money that's currently in your account <i>Either</i> Place an X in this box: <input type="checkbox"/> Do not switch my current account balance <i>Or</i> Choose how you would like to switch your current account balance below: Switch my current balance to:	Future transactions You must complete this column even if there is no change in the way you would like your future transactions allocated. Apply my future transactions to:
Investment options			
LESF MySuper	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %
Equities	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %
Conservative	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %
Cash	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %
High Growth	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %
Listed Property	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/> <input type="text"/> %
	100 %	100 %	100 %

Please turnover to complete and sign this form

Section 3: Declaration and Disclaimer

Please direct my current account balance and all future transactions made by me and/or on my behalf to the investment choice option(s) that I have nominated on this form.

I declare that:

- I have received, read and understood all of the information that I reasonably require, in order to make an informed decision about my investment options and how to complete this form.
- I understand that any information provided by LESF is of a general or factual nature only. The information does not take into account my personal investment objectives, financial situation or particular needs. I acknowledge that LESF has recommended that I seek professional financial advice before making any investment decision.
- I understand and accept that investment carries risk; that the return on my investment may be positive or negative, as detailed in the Product Disclosure Statement.
- It is my intention that the Trustee act upon my instructions contained in this form as soon as practicable and that these instructions will supersede all previous investment elections.
- I understand that my instructions will be processed after this form is accepted by the Trustee in accordance with the unit price applicable at that time.
- I understand that once I make an investment choice, it cannot be reversed. A further switch can be lodged which will take effect on the relevant date for that particular switch.

Signature of member



Dated (ddmmyyyy)

□ □ □ □ □ □ □ □

A copy of the current PDS is available on the LESF Super website at: www.lesf.com.au.