

15 December 2023

## Change of details

### Super and Pension

Please use this form for change of member details, name, contact details and pension payment details.

If you wish to renew or change your advice fees, adviser details, nomination of beneficiaries, investment strategy, direct debit details, nominated financial institution details, or insurance, please complete the relevant form available from your financial adviser, from our website or by contacting us (where applicable).

Please complete these instructions in BLACK INK using CAPITAL LETTERS and ✓ boxes where provided.

### Section 1: Member details

Account type	<input type="checkbox"/> Super <input type="checkbox"/> Pension	Account number*	<input type="text"/>
Title (Dr/Mr/Mrs/Ms/Miss)	<input type="text"/>	Surname*	<input type="text"/>
Given name(s)*	<input type="text"/>		
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>		

\* Indicates a mandatory field. If you do not complete all of the mandatory fields, there may be a delay in processing your request.

### Section 2: Change of name

Only complete this section if your name has changed. When completing this section, please ensure all fields in Section 1 have been completed.

☐ I confirm my residential address has not changed. (If it has please complete Section 3)

#### New name

Title (Dr/Mr/Mrs/Ms/Miss)	<input type="text"/>	Surname	<input type="text"/>
Given name(s)	<input type="text"/>		

Please enclose one of the following proof of change of name documents (please tick appropriate box(es)):

- ☐ An **original certified copy** of your marriage certificate
- ☐ An **original certified copy** of your change of name certificate
- ☐ An **original certified copy** of your marriage certificate and Divorce Order

And one of the following primary identification documents issued in your new name:

- ☐ An **original certified copy** of your driver's licence issued under State or Territory law
- ☐ An **original certified copy** of your passport

Please note we can only accept a marriage and/or change of name certificate that has been issued by Birth, Deaths and Marriages Registration Office.

For name changes, an original certified copy of the original documents will need to be provided via post. Please refer to the 'Completing Proof of Identity' document on [myexpand.com.au](http://myexpand.com.au) for a list of persons authorised to certify copies of original documents.

Signature of client/ Power  
of Attorney or Guardian

Date  /  /

Previous signature  
(where name has changed)

Date  /  /

### Section 3: Change of residential address and other contact details

For a fast and convenient way to change your contact details simply log into Expand Online and enter your user ID and password. If you have not registered for Expand Online, please click on the 'Register for access' link and follow the instructions to gain access.

Alternatively, please contact ClientFirst on 1800 517 124. Please note that you will need to satisfy an identification check of the mandatory fields in Step 1, to change your details.

If you are unable to change your contact details using the above methods please complete the details below. When completing this section, please ensure all fields in Section 1 have been completed.

If you are residing overseas you must complete and submit the below forms. If you are updating your country of residence we may also request an original certified copy of your identification. For more information on acceptable ID and a list of certifiers refer to the Proof of Identity Guide on [myexpand.com.au](http://myexpand.com.au).

☐

an **Overseas Investor** form, and

☐

Original certified copies of your identification documents

Address

Suburb

State

Postcode

Phone (home)

Phone (work)

Mobile

Email

### Section 4: Change of postal address

Is your postal address the same as your residential address provided in Step 3?

☐

Yes

☐

No

Please provide postal address if different from the residential address in Step 3.

Address

Suburb

State

Postcode

Phone (home)

Phone (work)

## Section 5: Change to pension payment (Pension only)

### A. Please change my pension payment to:

#### Frequency

☐ Fortnightly
 ☐ Monthly
 ☐ Quarterly
 ☐ Half-yearly
 ☐ Yearly

Pension payments will be made on the first available date after the form is processed, OR

☐ I would like to select a specified next payment date.

Date  /  /

Please note:

- If this request is not processed in time to meet this date, we'll use the next available date to process your pension payment.
- We may process your pension payment earlier than the specified date, to ensure it reaches your nominated financial institution on time.
- If the selected payment date is unavailable for any month, we'll aim to make the payment on the nearest available business day prior to that date.
- There may be delays in early July as we recalculate pensions for the new financial year.

### B. Please select the level of annual pension required:

Select the level of annual pension required.

☐ Minimum<sup>1</sup>  
☐ Maximum (TTR & TAP only). Please confirm amount: ☐ Full maximum **OR** ☐ Pro-rata maximum  
☐ Fixed calculated amount (TAP only)  
☐ A Nominated amount \$  per annum **OR** \$  per payment<sup>2</sup> ☐ Net ☐ Gross

#### Annual increase<sup>3</sup>

☐ Indexation rate  % or CPI ☐

**Please note:** We require five business days to action your request. If we have not received your request in time to alter your next scheduled payment, please be assured your alteration will take effect from the following payment.

You can specify a nominated amount you'd like paid; however, this must be within the required minimums and maximum (if applicable) limits. If you nominate an amount outside these limits, we will adjust this amount to the minimum or maximum. For more information on these limits, please refer to the offer document for your product on [myexpand.com.au](https://myexpand.com.au).

- 1 If you commence your pension other than on 1 July, the minimum amount selected will be pro-rated.
- 2 This is a whole payment amount.
- 3 Annual increases are only applicable where you have selected a nominated amount.

If you are receiving pension payments and your financial institution details have changed, please complete the details below:

Name of financial institution   
 Account name   
 BSB  -  Account number

☐ I want to update my nominated financial institution with the above details for all future withdrawals & pension payments.

**Please note:**

- Ensure your account details are correct as we will not be liable for mistaken payments based on incorrect details.
- The account must be in your own name or in one jointly owned by you.

## Section 6: Member declaration

**Please note:** The Trustee collects the information in this form for the purpose of updating the information it holds about you. Any personal information provided in this form will be handled in accordance with the privacy policy at [myexpand.com.au/privacy](https://myexpand.com.au/privacy). If you do not provide all of the requested information, we may not be able to action your request.

- I consent to the collection and use of the above information by the Trustee for the purposes specified.
- I authorise the above changes to be made to my account details
- I declare that the details given in this form are true and correct.

**Please note:** If this form is signed under Power of Attorney, the Attorney declares that they have not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this form unless we have already received it).

Signature of member/  
Power of Attorney or  
Guardian

Date

/

/

Full name

**Please forward all correspondence and enquiries to**

**Post:** Expand  
GPO Box 264, Melbourne VIC 3001

**Email:** [clientfirst@myexpand.com.au](mailto:clientfirst@myexpand.com.au)

**Telephone:** 1800 517 124

**Web:** [myexpand.com.au](https://myexpand.com.au)