



# EXPAND

2 April 2024

## Transfer to Super

Use this form when you wish to transfer your existing superannuation or pension account, or part of your account, within the Fund into your existing Expand Essential Super or Expand Extra Super account.

### Important information:

- Before sending us your completed form, we recommend you consider the Product Disclosure Statement (PDS). The PDS will help you understand the product and decide if it is appropriate for your needs. A copy of the PDS is available at [myexpand.com.au](https://myexpand.com.au).
- You'll need to complete all the questions on this form and sign the declaration on the last page.

Please complete these instructions in **BLACK INK** using **CAPITAL LETTERS** (except for your email address) and **✓** boxes where provided.

### Step 1: Member details

Existing account number (this is the account you're transferring from):

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Title  
(Dr/Mr/Mrs/Ms/Miss)

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Surname

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Given name(s)

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### Step 2: Details required for transfer

Account number you're transferring to:

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Amount to be transferred:

☐ Entire balance

OR

☐ Partial transfer of \$

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The minimum amount to leave in your existing account is \$10,000 plus any liabilities.

## Investment instructions

### Full Transfers

Your investment options will be transferred to your existing Expand Super account where possible. Investment options not available in your existing Expand Super account will be redeemed and invested in the Cash Account until you provide us with investment instructions. If transferring from a pension account the minimum pension payment must be met before we can complete the full transfer.

### Partial Transfers

**Important note:** Please ensure you have met the relevant remaining minimum balance requirements of the existing account.

Please list below the investments and amount you wish to transfer. Partial transfers of SMA Model Portfolios are not available.

APIR code/ASX Code	Name of investment option	Units
<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"/>
<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"/>

**Please note:** It's important to be aware that your portfolio will not be re-weighted as a result of this transfer. A re-weight can be processed online by you or via your financial adviser, or by completing an Investment Instruction form.

## Step 3: Beneficiary nomination

Your existing beneficiary nomination will not carry across to your existing account as specified in Step 2. Would you like to establish a new beneficiary nomination for the target account?

- ☐ No
- ☐ Yes – Please complete and attach the Beneficiary nomination form

## Step 4: Insurance transfer

Would you like to transfer any existing insurance cover to the target account specified in step 2? I acknowledge I'm electing to retain my insurance even if my balance is less than \$6,000 and/or I'm under age 25.

- ☐ Yes
- ☐ No

**Please note:** We may contact you for further information, including to confirm your smoker status or occupation.

## Step 5: Member/applicant declaration and signature

**Important note:** The Trustee collects the information in this form in order to process your transfer.

Any personal information provided in this form will be handled in accordance with the Trustee's privacy policy, available 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.

By signing this form, I confirm:

- I consent to the transfer of superannuation as described above and authorise the Trustee to give effect to the transfer.
- I have received and considered the current PDS for my superannuation account.
- I understand that where I have chosen an investment with a long withdrawal period (illiquid investments) or there are delays receiving proceeds from selling my investments, any withdrawal or transfer request may be delayed for more than 30 days.
- I acknowledge that my account will not be re-weighted as a result of this transfer.
- I have received and considered the relevant PDS and Target Market Determination (where relevant) for each of the investment options selected.
- I understand and acknowledge the implications (including any potential impacts to my existing insurance) of transferring my superannuation to my nominated Expand account.
- The amount of any Member Advice Fee(s) that are paid to my financial adviser, as agreed by me, will be an additional cost to me and charged against my super account. A Member Advice Fee will not be charged unless I tell the Trustee to do so.

### Member signature

Date  /  /

**Please forward all correspondence and enquiries to:**

**Post:** Expand  
Reply Paid 264, Melbourne VIC 8060

**Email:** [clientfirst@myexpand.com.au](mailto:clientfirst@myexpand.com.au)  
**Telephone:** 1800 517 124