

Complete this form using **black pen**. Print in clear – **CAPITAL LETTERS**

Advance Contact Centre 1800 819 935  
Mon–Fri from 8.30am to 7.00pm, Sydney time

- Please note, you can make switches on Investor *Online* if you have an Investor *Online* password. See [advance.com.au](http://advance.com.au) for log-in instructions.
- The PDS for the Advance Investment Funds may be supplemented or replaced from time to time. Prior to completing this form, please ensure you have a copy of the current PDS and any supplementary material, which you can download from [advance.com.au](http://advance.com.au).

## 1. INVESTOR DETAILS

Investor Number

**C**

### INVESTOR A – INDIVIDUALS, JOINT INVESTORS OR TRUSTEES

Title

Mr  Mrs  Miss  Ms  Other

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

/   /

Phone number during business hours

{  }

Residential address/Registered office (PO Box not acceptable)

State Postcode

Country, if not Australia

Postal address (if different from above)

State Postcode

Country, if not Australia

### INVESTOR B – JOINT INVESTORS OR TRUSTEES

Title

Mr  Mrs  Miss  Ms  Other

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

/   /

Phone number during business hours

{  }

Residential address/Registered office (PO Box not acceptable)

State Postcode

Country, if not Australia

Postal address (if different from above)

State Postcode

Country, if not Australia

### COMPANIES, ASSOCIATIONS OR OTHER INVESTORS

Full name of company, association or other investor

ABN (if applicable)

### NAME OF TRUST ACCOUNT

Provide your account reference (where account is held on behalf of others)

## 2. SWITCHING DETAILS

Please specify whether you're requesting a switch of units OR dollars then complete the amount. If you're switching your entire investment in a fund(s), please write 'full' beside the relevant fund(s).

Wholesale Investment suite fund	APIR code	For Advance use only  Trust - fund code	Switch FROM (specify [x]) <input type="checkbox"/> units or <input type="checkbox"/> \$ If you don't [x] a box your request will be treated as a request in dollars.	Switch TO (specify [x]) <input type="checkbox"/> units or <input type="checkbox"/> \$ If you don't [x] a box your request will be treated as a request in dollars.	Distribution options Select a distribution option for your investment. If you don't select a distribution option and haven't set up a Regular withdrawal Plan, this will be treated as a request to reinvest your distribution.	
					Reinvest	Pay to bank (also complete Section 3)
Advance Defensive Multi-Blend Fund	ADV0049AU	AWI-DMB			<input type="checkbox"/>	<input type="checkbox"/>
Advance Moderate Multi-Blend Fund	ADV0091AU	AWI-MMB			<input type="checkbox"/>	<input type="checkbox"/>
Advance Balanced Multi-Blend Fund	ADV0050AU	AWI-BMB			<input type="checkbox"/>	<input type="checkbox"/>
Advance Growth Multi-Blend Fund	ADV0085AU	AWI-GMB			<input type="checkbox"/>	<input type="checkbox"/>
Advance High Growth Multi-Blend Fund	ADV0087AU	AWI-HGM			<input type="checkbox"/>	<input type="checkbox"/>
Advance Australian Shares Multi-Blend Fund	ADV0045AU	AWI-ASM			<input type="checkbox"/>	<input type="checkbox"/>
Advance Australian Smaller Companies Multi-Blend Fund	ADV0096AU	AWI-SCM			<input type="checkbox"/>	<input type="checkbox"/>
Advance International Shares Multi-Blend Fund	ADV0053AU	AWI-ISM			<input type="checkbox"/>	<input type="checkbox"/>
Advance Property Securities Multi-Blend Fund	ADV0095AU	AWI-PSM			<input type="checkbox"/>	<input type="checkbox"/>
Advance Australian Fixed Interest Multi-Blend Fund	ADV0084AU	AWI-AFI			<input type="checkbox"/>	<input type="checkbox"/>
Advance International Fixed Interest Multi-Blend Fund	ADV0067AU	AWI-IFI			<input type="checkbox"/>	<input type="checkbox"/>
Advance Alternative Strategies Multi-Blend Fund	ADV0159AU	AWI-ALT			<input type="checkbox"/>	<input type="checkbox"/>
Advance Asian Shares Multi-Blend Fund	ADV0083AU	AWI-AEF			<input type="checkbox"/>	<input type="checkbox"/>
Advance Cash Multi-Blend Fund	ADV0069AU	ARI-CHS			<input type="checkbox"/>	<input type="checkbox"/>
Alleron Australian Equity Growth	ADV0133AU	AWI-AEG			<input type="checkbox"/>	<input type="checkbox"/>
Advance Concentrated Australian Share*	ADV0115AU	AWI-CAS			<input type="checkbox"/>	<input type="checkbox"/>
Advance Australian Smaller Companies*	ADV0075AU	AWI-SMC			<input type="checkbox"/>	<input type="checkbox"/>
Advance Tradewinds Global Equities*	ADV0134AU	AWI-TGE			<input type="checkbox"/>	<input type="checkbox"/>
Advance International Sharemarket*	ADV0047AU	AWI-ISH			<input type="checkbox"/>	<input type="checkbox"/>
Advance International Shares Core*	ADV0068AU	AWI-ISC			<input type="checkbox"/>	<input type="checkbox"/>
Advance Property Securities*	ADV0052AU	AWI-PRO			<input type="checkbox"/>	<input type="checkbox"/>
Advance Global Property*	ADV0135AU	AWI-GPR			<input type="checkbox"/>	<input type="checkbox"/>
Advance Global Alpha*	ADV0117AU	AWI-GAF			<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL</b>						

\* Investments can only be made into these funds if there is an existing investment as this fund is closed to new investors.

### 3. BANK ACCOUNT DETAILS

If switching to a new fund, please select a distribution option above if no distribution option is nominated for the fund you are switching to, distributions will automatically be reinvested. If switching to an existing fund holding, previous distribution instructions still apply.

**IF YOU HAVE A REGULAR SAVINGS PLAN AND YOU MAKE A FULL SWITCH, THE PLAN WILL AUTOMATICALLY TRANSFER TO THE FUND(S) TO WHICH YOU ARE SWITCHING.**

**MUST BE AN ACCOUNT IN THE NAME OF THE APPLICANT AND NOT A THIRD PARTY.**

Name of Australian financial institution

Branch name

BSB number

Account number

Account holder's name(s)

  

### 4. INVESTOR'S DECLARATION AND SIGNATURE

**ALL INVESTORS MUST SIGN AND DATE THIS FORM WITH POSITIONS INDICATED IF A COMPANY ACCOUNT**

By signing this form I/we:

- acknowledge that I/we have read and understood the current Advance Investment Fund Product Disclosure Statement(s) (PDS) to which this Switch Request relates and I/we agree to be bound by the terms of this PDS and the terms of the relevant constitution(s), each as amended from time to time
- declare that all the details given in this form are true and correct
- acknowledge that none of Westpac Banking Corporation or its related entities stands behind or otherwise guarantees the capital value or the investment performance of any fund offered in the PDS
- acknowledge that investments in the funds are not deposits or liabilities of Westpac Banking Corporation or any other company in the Westpac Group of companies and that investments in the funds are subject to investment risks, including possible delays in repayment and loss of income and principal invested
- confirm that declarations I/we have made in other forms continue to apply to the extent possible.

Joint applicants must all sign unless we have received prior instructions from all investors that any can sign solely.

If signing under a Power of Attorney, you verify that, at the time of signing, you haven't received notice of revocation of that power. Please provide a certified copy of the original Power of Attorney including the appointed Power of Attorney's signature, if not already provided to us.

In the case of company signatories, two directors, or a director and a company secretary, must sign unless a sole director and sole secretary.

Signature of Investor A, Director or Sole Trader

Date (dd/mm/yy)

Signatory's full name (please print)

Position (companies only)

Director  Sole Director and Sole Secretary

Clubs/associations/unincorporated bodies (indicate office title)

Signature of Investor B, Director or Sole Trader

Date (dd/mm/yy)

Signatory's full name (please print)

Position (companies only)

Director  Company Secretary

Clubs/associations/unincorporated bodies (indicate office title)

**You can submit this form by:**

mail Advance Asset Management  
GPO Box B87  
Perth WA 6838

fax (02) 9274 5211

Provided no new bank account details are provided in Section 3.

### 5. ADVISER USE ONLY

Adviser Number

**A**

Work phone number

( )

Mobile phone number

Title

Mr  Mrs  Miss  Ms  Other

Given name(s)

Surname

Signature of adviser

Date (dd/mm/yy)