

Change in distributions instruction

For all Funds in the Zurich Investment Funds.

Investor number												
Name of Fund/s												
Adviser name (if applicable)												
Investor's personal detai	ls											_
nvestor name												
Address						State			Postc	ode		
Contact details												
Vork				Home								
Mobile				Email								
Deposit directly into the follow Name of financial institution Branch name	wing bank (or financ	ial instit	ution account								
Branch address						State			Postc	ode		
Account name												
Bank/State/Branch (BSB number)					Account	number						
Please check with your bank or fin nformation can result in payment Signatures												
		this form		indicated othe	rwise in your initial	application						
Please note that all joint investors be signed by each trustee. In the c director is also sole company secre	case of com		natories	s two directors			secret	ary m	iust sig			
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5 Your privacy

Zurich is bound by the Privacy Act 1988 (Cth). In completing the forms or questions herein you will be providing us with your personal and, perhaps, sensitive information. The collection and management of this information is governed by the Privacy Act 1988. For a more detailed explanation of Zurich's Privacy Policy please visit our website at www.zurich.com.au or contact the Zurich Privacy Officer on 132 687 or email us at privacy.officer@zurich.com.au.

Any questions?

Please contact our Client Service Centre on 131 551.

Fax: 02 92870302

Email: client.service@zurich.com.au

Please send your completed form to:

Zurich Investment Management Ltd PO Box 5038 Parramatta NSW 2124