



IMPORTANT!

You must sign and date this declaration in the presence of two witnesses, who must also sign and date the Witness declarations ON THE SAME DAY AS YOU. The witnesses must be over the age of 18 and must not be beneficiaries nominated on this form.

4. Member and witness declarations and signatures

- I have read the information in this form and in the relevant Product Disclosure Statement (PDS) and I understand the terms on which this nomination is made;
- I acknowledge this nomination will only be valid if the beneficiaries listed are my spouse, child, financial dependant, interdependent or legal personal representative of my estate when I die, and the nomination is signed by me in the presence of two witnesses who are 18 years of age or older and not listed as beneficiaries;
- I understand that a lapsing nomination is valid for three years from the day after the date it is signed or last confirmed;
- I understand that a non-lapsing nomination is valid from the day after the date it is signed or last confirmed and it does not expire;
- I understand that I can amend this nomination by completing a new *Binding death benefit nomination form*;
- I understand that I can cancel my nomination by completing a *Cancellation of binding death benefit nomination form*;
- I understand that if this nomination is invalid or has not been received by First State Super when I die, my death benefit will be paid at First State Super's discretion;
- I acknowledge that my beneficiaries and I will be bound by the provisions of First State Super's Trust Deed, and that First State Super accepts no responsibility for the correct nomination of beneficiaries.
- I have read and understood the First State Super privacy policy.

Member name (Print in BLOCK letters)

Member signature

Date (DD-MM-YYYY)

This MUST be the same date that the form is witnessed



Please sign and date form here.

Witness declarations

I declare that I am over the age of 18 and this nomination was signed and dated by the member in my presence.

Witness 1 name

Witness 1 signature

Date (DD-MM-YYYY)

This MUST be the same date that the form is signed by the member



Only originals or certified copies of this form will be accepted.

Address

Suburb

State

Postcode

Daytime contact number

Date of birth (DD-MM-YYYY)

Email

Witness 2 name

Witness 2 signature

Date (DD-MM-YYYY)

This MUST be the same date that the form is signed by the member

Address

Suburb

State

Postcode

Daytime contact number

Date of birth (DD-MM-YYYY)

Email



Send the form to this address.

5. Where to send your completed form

Return the completed form to **First State Super PO Box 1229 WOLLONGONG NSW 2500**. If you have any questions, please call us on **1300 650 873**.

Notes for completing the binding death benefit nomination form



Before making a decision about a binding death benefit nomination, you should read the relevant Product Disclosure Statement (PDS) available by calling customer service on **1300 650 873**.

A binding death beneficiary nomination for your Defined Benefit lump sum (excluding any lifetime pension) overrides any prior death benefit nomination(s) you have previously made for your Defined Benefit account. The binding nomination will only apply for your Defined Benefit account. If you have another account with us (e.g. Accumulation account) you will need to make a separate death benefit nomination for that account.

2. Details of beneficiaries

Lapsing and non-lapsing nominations

A binding nomination can be either lapsing or non-lapsing. A lapsing binding death benefit nomination is valid for up to three years from the day after the date it was first signed, or last confirmed or amended. For the initial nomination to be valid, you must complete, sign and date this form correctly. The form must be signed and dated by two witnesses on the same date that you sign the form. For the nomination to remain valid, you must confirm the nomination in writing every three years before the three-year period expires. We will send you a renewal notice shortly before the three-year expiry date so you can confirm your nomination. You must sign and date the confirmation but it does not need to be witnessed.

A non-lapsing binding death benefit nomination does not expire, so it does not need to be confirmed every three years. However, we will still send you a courtesy letter every three years to give you an opportunity to update the details of your nomination.

The people you may nominate under a binding nomination must be one or more of the following at the time the Trustee pays the benefit:

- your current spouse or de facto
- your children, including step, adopted and ex-nuptial children
- any person(s) financially dependent on you
- a person in an interdependency relationship with you
- your legal personal representative – the executor or administrator of your estate.

The total of your nominations (whether you make one or more nominations) **MUST** add up to 100%. Your nomination(s) will be invalid if the total is not 100%. No decimals are allowed. If, for example, you want to split your death benefit into thirds, you should round the split to the nearest whole percentage eg. 33%, 33% and 34%.

You should ensure that you review your nomination when your personal circumstances change.

Only originals or certified copies of this form will be accepted.

3. Member and witness declarations and signatures

You must sign and date this declaration in the presence of two witnesses, who must also sign and date the witness declarations **ON THE SAME DAY AS YOU**. The witnesses must be over the age of 18 and must not be beneficiaries nominated on this form.