

# Officers' Superannuation Fund Change of Details Form

25 August 2010

Commonwealth Bank Officers Superannuation Corporation Pty Limited (ABN 76 074 519 798, AFSL 246418, RSEL L0003087) as Trustee for the Officers' Superannuation Fund (OSF) (ABN 24 248 426 878, RSER R1056877).

Please phone OSF Investor Services on **1800 023 928** with any questions about this form.

Please complete this form using BLACK INK and print well within the boxes in CAPITAL LETTERS. Mark appropriate answer boxes with a cross like the following **X**. Start at the left of each answer space and leave a gap between words.

## COMPLETION CHECKLIST

Please indicate your reason(s) for completing this form:

- I want to change my contact details—complete Parts 1, 2 and 6 of this form
- I want to change my name—complete Parts 1, 3 and 6 of this form
- I want to provide my tax file number—complete Parts 1, 4 and 6 of this form
- I want to change my online account access—complete Parts 1, 5 and 6 of this form

## 1. INVESTOR DETAILS

OSF account number

Given name(s)

Surname

Date of birth

Daytime contact number

## 2. CHANGE OF CONTACT DETAILS

Complete this section **ONLY** if these details are changing

Residential address (PO Box is NOT acceptable)

Unit number	<input type="text"/>	Street number	<input type="text"/>	Street name	<input type="text"/>
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>

Postal address (if different to above)

Unit number	<input type="text"/>	Street number	<input type="text"/>	PO Box	<input type="text"/>	Street name	<input type="text"/>
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>		<input type="text"/>

Daytime phone number

Fax number

Mobile phone number

Email address

By providing your email address, you agree that we may use this address to provide you with information about your investment (such as transaction confirmations, statements, reports and other material). From time to time we may still need to send you letters in the post.

### 3. CHANGE YOUR NAME

If your name has changed, please attach a copy of the documentation by which you registered your change of name, such as marriage certificate, deed poll or record of divorce. This documentation must be certified by a Justice of the Peace, solicitor or notary.

NEW title  Mr  Mrs  Miss  Ms  Other

NEW full given name(s)

NEW surname

OLD signature

NEW signature

### 4. PROVIDING YOUR TAX FILE NUMBER

Refer to the product disclosure statement for information on providing your tax file number.

I agree to provide my tax file number to the OSF Trustee:  -  -

### 5. CHANGE TO ONLINE ACCOUNT ACCESS

You already have 'enquiry' access to view your Division F account online at [www.osfsuper.com.au](http://www.osfsuper.com.au) using FirstNet. If you would also like to be able to perform online transactions such as switch investment options and update your personal details, you must request 'transact' access to your account.

**OPTIONAL:** If you wish to change from the default 'enquiry' access for your account, choose one of the following options:

I would like online 'transact' access to my account  I do not want ANY online access (including enquiry access) to my account

### 6. DECLARATION AND SIGNATURE

I declare that:

- All details in this form are true and correct.
- I have read and understood the current PDS.
- 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 sighted it).

Signature

Print name

Date

Please send the completed form to:  
OSF Investor Services, GPO Box 4758, Sydney NSW 2001