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Global Investment Service Withdrawal form

Mason Stevens Limited ABN 91 141 447 207 AFSL 351578

Use this form to provide us with instructions for a partial or full withdrawal from your Mason Stevens Global Investment Service account. If you wish to withdraw from your Mason Stevens Super account, use the Mason Stevens Super Withdrawal/ Rollover form.		
	Please ensure the account has sufficient funds in the Self-Directed Portfolio to cover the amount you wish to withdraw plus the required minimum balance.	
	You are responsible for placing any orders to sell down assets to ensure there are sufficient funds in the Self-Directed Portfolio.	
	Please confirm if all expected distributions and dividends have been received into the Self-Directed Portfolio as outstanding transactions may cause delays in our ability to process this withdrawal request.	
	If this is an account closure request and you are also in-specie transferring assets out of the account please ensure you have completed and submitted the relevant asset transfer forms.	
You	Ir Account 1	

Account Name Account number Mobile number

Withdrawal Details

Α.	Is this a full withdrawal?	
	No, I wish to make a partial withdrawal for the amount of A\$	

Yes, please close this account once the full withdrawal is completed.

B. If your account has outstanding transactions (eg. redemptions, corporate actions, fees to be paid, suspended funds, distributions/dividends) would you like us to transfer as much benefit as possible now, and the remainder when it is all available in the Self-Directed Portfolio?

Yes, please transfer as much benefit as you can, and the remainder when it becomes available in the Self-Directed Portfolio.

No, please wait for all funds to become available in the Self-Directed Portfolio and transfer all funds in one go.

Destination Account

Deposited into my nominated bank, building society or credit union account on your record.				
Deposited into the following account:				
The destination account must be in the same name as your Mason Stevens account.				
Name of financial institution				
Account name				
BSB number	Account number			
Deposited into my Mason Stevens account:				
Account name				
Account number				

All account holders must sign this form. By signing below, you acknowledge that:

- » you authorise your registered financial adviser to redeem assets in your account to the amount specified in Section 2 at market rates and until sold.
- » if there is insufficient cash in your Self-Directed Portfolio for us to process your withdrawal request and your adviser does not action the sell down of any assets within three business days of receipt of a fully completed form and other required documentation, Mason Stevens at its discretion will sell sufficient assets at market rates without contacting you or your adviser.
- » if you have instructed us to make a full withdrawal, we will close your account after the funds have been paid out.
- » if you do not have a registered financial adviser on the account, you authorise Mason Stevens to redeem assets to the amount specified in Section 2 at market rates and until sold.
- » in having your assets redeemed, you acknowledge you will incur transaction fees as well as any costs related to the breaking of any term deposits you hold, as disclosed in the applicable offer document.
- » this instruction will be acted on and effected by Mason Stevens as soon as practicable.
- » any illiquid assets in your account that need to be sold down may take longer than 30 days to settle into your Self-Directed Portfolio.
- » the processing of the withdrawal may be impacted by the redemption of assets which is outside Mason Stevens and the adviser's control.
- after Mason Stevens have processed the withdrawal they will not be responsible for any delay or misuse of those monies which may occur thereafter. Masons Stevens will not be held responsible for any loss or action arising from such a delay or misuse.
- w this instruction will only be processed once the form has been completed correctly and in full and any supporting documents required have been completed and provided. Mason Stevens is not responsible for any delays or losses resulting from incorrect or incomplete information being provided.
- » you agree to retain the original form if I am submitting this form to Mason Stevens via electronic means and will provide to Mason Stevens upon request.

Signature 1	Signature 2
Full name	Full name
Date	Date
DD / MM / YYYY	DD / MM / YYYY
Director Sole Director Secretary	Director Sole Director Secretary
Signature 1	Signature 2
Full name	Full name
Date	Date
DD / MM / YYYY	DD / MM / YYYY
Director Sole Director Secretary	Director Sole Director Secretary