



BT Classic Investment Funds Flexi Payment Plan Request

BT Customer Relations © 132 135 (8am–6.30pm Mon–Fri, Sydney time)

- You can change or suspend your Flexi Payment Plan by contacting us at least seven business days before the end of the distribution period in which you wish to make the change. Payments are paid directly into your nominated Australian bank account at the end of the Fund's distribution period (refer to the BT Classic Investment Funds Product Disclosure Statement for distribution frequencies).
- The Responsible Entities for the Funds offered through BT Classic Investment Funds are BT Funds Management Limited ABN 63 002 916 458, AFSL 233724 and BT Funds Management No. 2 Limited ABN 22 000 727 659, AFSL 233720.

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

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)

/ /

Daytime phone number

()

Mobile phone number

Email address*

INVESTOR B – JOINT INVESTORS OR TRUSTEES

Title

Mr Mrs Miss Ms Other

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

/ /

Daytime phone number

()

Mobile phone number

Email address*

COMPANIES, ASSOCIATIONS OR OTHER INVESTORS

Full company name, association or other investor

Mobile phone number

()

ACCOUNT REFERENCE

Provide an account reference where account is held on behalf of others – name of partnership, trust or superannuation fund, child, estate, club/association

* In the future, BT may elect to email correspondence to you

2. REASON FOR COMPLETING THIS FORM

- I am starting a **new Flexi Payment Plan**.
- I am **changing an existing Flexi Payment Plan**. This request replaces any previous request.

3. FLEXI PAYMENT PLAN DETAILS

Nominate the fixed payment you would like to receive from your investment.

Investment options	Adviser use only	Specify amount to be paid from each investment option
BT Active Balanced Fund – NEF ¹	RFA0021AU	\$
BT Asset Selection Fund	BTA0080AU	\$
BT Balanced Returns Fund	BTA0043AU	\$
BT Tax Effective Income Fund – NEF ¹	RFA 0023AU	\$
BT Split Income Fund	BTA0011AU	\$
BT Monthly Income Fund	BTA0041AU	\$
BT Diversified Share Fund – NEF ¹	RFA 0024AU	\$
BT Split Growth Fund	BTA0012AU	\$
BT International Share Fund	BTA0058AU	\$
BT Core Australian Share Fund	RFA0011AU	\$
BT Select Australian Share Fund	RFA0064AU	\$
BT Ethical Share Fund	RFA0027AU	\$
BT Natural Resources Fund	RFA0013AU	\$
BT Australasian Bond Fund	BTA0003AU	\$
BT Global Bond Fund	BTA0001AU	\$
TOTAL		\$

¹ A withdrawal fee may apply where your nominated amount exceeds your distribution. If a withdrawal fee is payable, we will also withdraw sufficient funds to cover this fee.

4. PAYMENT ACCOUNT DETAILS

Complete this section if distributions, withdrawals or Flexi Payment Plan payments are to be made to a financial institution account.

Only Australian financial institution account details will be accepted. The bank account must be in the 'name' of the BT investment.

Name of financial institution

Branch name

BSB number

Account number

Account name

5. INVESTOR'S DECLARATION AND SIGNATURE

In signing this Flexi Payment Plan Request form, I/we:

- acknowledge that I/we have read and understood a copy of the current BT Classic Investment Funds Product Disclosure Statement (PDS) and I/we agree to be bound by the PDS and the relevant constitution(s), each as amended from time to time.
- declare that all the details given in this application are true and correct.

**YOUR REQUEST CANNOT PROCEED
IF THIS SECTION IS NOT SIGNED**

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

If signing under Power of Attorney (POA), you verify that, at the time of signing, you have not received notice of revocation of that power. Please provide an originally certified copy of the POA including the appointed POA signature, if not already provided to us. If the POA's signature is not included, please attach two originally certified copies of identification.

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

Signature of **Account holder A or company officer A**

Date (dd/mm/yy)

Signatory's full name (please print)

Director Sole Director and Sole Company Secretary

Signature of **Account holder B or company officer B**

Date (dd/mm/yy)

Signatory's full name (please print)

Director Company Secretary

You can submit your completed form by:

- mail BT Financial Group
GPO Box 2675 Sydney NSW 2001
- fax (02) 9274 5402

Note that this form can only be faxed from a Westpac branch unless we have a signed Facsimile Facility Authority on file.

6. ADVISER USE ONLY

BT Adviser number

A

Title

Mr Mrs Miss Ms Other

Given name(s)

Surname

Phone number

Fax number

Mobile phone number

Office postcode

InvestmentLink ILCN (client no.)

ILGN group number

Financial adviser stamp (please use black ink only)