BT Classic Investment Funds
Flexi Payment Plan Request

BT Financial Group

- Questions? Please call BT Customer Relations on 132 135, from 8.00am to 6.30pm (Sydney time), Monday to Friday.
- 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.
- Australian Financial Services License (AFSL): The AFSL numbers for BT Funds Management, BT Funds Management No.2 Limited are 233724 and 233720 respectively.

BT Customer Relations 132 135
September 2006

Please complete the form using a BLACK PEN, print in CAPITAL LETTERS and mark answer boxes with a [X]

1. BT INVESTOR DETAILS

BT investor number

C

INVESTOR A – INDIVIDUALS, JOINT INVESTORS OR TRUSTEES

TITLE ☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

LAST NAME

GIVEN NAME(S)

Phone number (INDICATE TYPE)

☐ HOME ☐ MOBILE ( )
☐ WORK ☐ FAX

INVESTOR B – JOINT INVESTORS OR TRUSTEES

TITLE ☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

LAST NAME

GIVEN NAME(S)

COMPANIES, ASSOCIATIONS OR OTHER INVESTORS

Full name of company, association or other investor

ABN (IF APPLICABLE)

- - -

NAME OF TRUST ACCOUNT

Provide your account reference (where account is held on behalf of others)

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	For adviser use only	Specify the amount to be paid from each fund
BT Active Balanced Fund – NEF[1]	RFA0021AU	$
BT Asset Selection Fund	BTA0060AU	$
BT Balanced Returns Fund	BTA0043AU	$
BT Tax Effective Income Fund – NEF[1]	RFA0023AU	$
BT Split Income Fund	BTA0011AU	$
BT Monthly Income Fund	BTA0041AU	$
BT Diversified Share Fund – NEF[1]	RFA0024AU	$
BT Split Growth Fund	BTA0012AU	$
BT International Share Fund	BTA0058AU	$
BT Core Australian Share Fund	RFA0011AU	$
BT Select Australian Share Fund	BTA0064AU	$
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 A withdrawal fee may apply where your nominated amount exceeds your distribution, and the shortfall is withdrawn from your investment.

BT USE ONLY

BT5979.C 09/06
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4. PAYMENT ACCOUNT DETAILS

Flexi Payment Plan payments can only be made to a nominated financial institution account. This account cannot be in the name of a third party. Please provide account details here.

NOTE **Only Australian financial institution details will be accepted.**

NAME OF FINANCIAL INSTITUTION	
BRANCH NAME	
BSB NUMBER	ACCT NUMBER
ACCOUNT NAME	

5. INVESTORS DECLARATION AND SIGNATURE

By signing this application form:

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

ALL INVESTORS MUST SIGN AND DATE THIS FORM

If signing under a Power Of Attorney, 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 Power Of Attorney including the appointed Power Of Attorney's signature, if not already provided to us.

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

▸ Signature of Investor A or company officer

DATE (DD – MM – YYYY)

Signatory name

Company signatories must indicate their company title

☐ Director OR ☐ Sole director and sole secretary

▸ Signature of Investor B or company officer

DATE (DD – MM – YYYY)

Signatory name

Company signatories must indicate their company title

☐ Director OR ☐ Company secretary

Mail your completed Flexi Payment Plan Request form to:

BT Financial Group
GPO Box 2675
SYDNEY NSW 2001

6. ADVISER USE ONLY

BT adviser number

A

Phone number (INDICATE TYPE)

☐ WORK ☐ FAX ☐ MOBILE ( )

TITLE	☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other
LAST NAME	
GIVEN NAME(S)	

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