

Perpetual Select Super Plan Instruction Form

Please send your completed form to us in the reply paid envelope provided by 20 March 2017. Only complete this form if you DO NOT want your existing Perpetual Select Super Plan **(Super Plan)** account balance transferred to Perpetual MySuper (**MySuper**) in April 2017.

1. Your personal details

Name:	<given name=""> <surname></surname></given>		
Client number:	<investor id=""></investor>	Account number:	<account number=""></account>
Investment option:	<capital balanced="" diversified="" guarantee=""></capital>		

2. Confirmation of instruction

Stay in your current Super Plan investment option

By signing this instruction:

I confirm that I do not want my existing Super Plan balance to automatically transfer to MySuper.

I instruct the Trustee of my choice to keep my account balance in the investment option specified above.

I understand that:

- I will not be transferred to MySuper in April 2017
- There will be no change to my current Super Plan insurance arrangements
- Any existing MySuper account I may have will continue to be maintained separately unless an instruction is provided*
- Perpetual must receive this instruction by 20 March 2017 or my Super Plan existing balance will be transferred to MySuper.

* You are able to consolidate any existing account with your current Super Plan by completing the 'Perpetual Select Super Plan Transfer Authority' form available on our website or by contacting us.

3. Your agreement and declaration

In providing this instruction, I confirm that I have considered the information in the enclosed letter and Booklet as well as the relevant Product Disclosure Statement(s).

Name

Signature

Date:/	/ 20
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Phone 1800 003 001

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