

CHANGE OF DETAILS FORM

Use this Form to amend your details relating to your DMG Diversified Portfolio or Clearwater Dynamic Portfolio.

The most efficient and preferred method to change your details is by contacting your Financial Adviser or via your Clearwater Online portal.

Please only complete the relevant sections on this form that you need to update.

Please post your completed form to:

Citi Unit Registry - Clearwater PM GPO Box 764 Melbourne, VIC 3001

1. INVESTMENT DETAILS	
Account	
Number:	
Trumber:	
Account Name:	
2. FUND NAME	
Please select the relevant fund in which the details are changing for:	
Trease select the relevant fund in which the details are changing for.	
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DMG Diversified Portfolio	
APIR Code: SLT0039AU	
Clearwater Dynamic Portfolio	
APIR Code: ETL6685AU	
AFIR Code. LTL000JAO	
3. ADDRESS/CONTACT DETAILS	
Residential Address (PO Box details are to be provided in the next sec	tion)
· · · · · · · · · · · · · · · · · · ·	·
Address:	
Audi ess.	
Suburb:	State
Supurp:	State:
	Post
Country:	Code:



Postal Address (if different from above) & Contact Details:

Address:						
Suburb:					State:	
Country:					Post Code:	
- 1411						
Email Address:						
Phone:		Mobile:				
4. UPDATE DISTRIBUTI	ON OPTIONS					
Please tick the relevant d	istribution metho	od:				
Reinvest your distrib	outions	D	istributions dep	oosited to	o nominated	bank account
5. BANK ACCOUNT DET	TAILS					
Please tick below which d	etails are to be ı	updated with 1	these bank deta	ails:		
Redemptions		Distributio	ns	Red	demptions &	Distributions
Please note only bank acco	ounts in the nam	e of the Inves	tor/Investing Er	ntity will	be accepted	
Financial Institution Name:						
BSB:						
Account Number:						
Account Name:						



6. FINANCIAL ADVISER DETAILS

I/We wish to appoint the following Financial Adviser. By nominating the below Financial Adviser, I/We wish to remove the previous Financial Adviser details that were in place.

Full given names:		
Surname:		
Email address:		
Contact number:		
Dealer group name:		
Dealer Group AFSL:		
7. SIGNATURE	S	
Signature	Name	Date: / / /
Signature	Name	Date: / /