

Oasis Fund Management Limited (Trustee) ABN 38 106 045 050 AFSL 274331 RSE L0001755 is Trustee of the Oasis Superannuation Master Trust (Trust) ABN 81 154 851 339, RSE R1004939

Use this form to roll your superannuation benefits into your Voyage Superannuation Master Trust.

- Do not cancel any existing insurance cover until your application for insurance has been assessed and accepted by your platform insurer. If you do not want your current insurance cover cancelled, do not complete this rollover authority.
- Ensure that your existing investment is clearly detailed below for the institution from which you are transferring.
- You do not need to complete this form if you are transferring from another Voyage superannuation fund.
- Rolling over your super benefit to Voyage may limit your ability to lodge or vary deduction notice for personal contributions made to the fund from which you are transferring.
- If you have multiple account numbers with this fund, please complete a separate form for each account you wish to transfer.
- Please complete, sign and return this request to Voyage.

PLEASE USE BLACK INK AND PRINT IN CAPITALS. MARK BOXES WITH AN [X] WHERE APPLICABLE.

1 Rollover details

! Please contact your existing superannuation provider to confirm if they have any additional requirements before they can action this rollover authority. Please complete all details and ensure that you provide us with a valid Australian Business Number (ABN) and Unique Superannuation Identifier (USI).

The fields below marked with an asterisk are mandatory.

To (paying institution):

Street name and number:

Suburb: State: Postcode:

Phone number (paying institution):

*Account/membership/policy number:

*Account/membership/policy name:

*ABN:

*USI:

*Amount to be transferred: Entire balance (your account will be closed)
If partial amount, please specify: \$

Please note: We cannot action special request, for example, leave a certain amount in external fund entity. Please provide the exact partial amount.

Voyage account receiving the transfer: Voyage Super (USI – OAM0001AU)
 Voyage Pension (USI – 81154851339183)

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Personal details

Title: Full given name(s):

Surname:

Date of birth: Gender: Male Female

Account number:

Postal address


Street number and name or PO Box:

Suburb: State: Postcode:

Residential address (leave blank if the same as your mailing address)

Street name and number:

Suburb: State: Postcode:

 If your personal details have changed, you may need to contact your existing superannuation provider and update their records before they action this authority.

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Cheque details

Required when an electronic rollover payment is not being made by the paying superannuation fund.

Please forward the cheque for the Transfer, this original completed form and any other relevant documentation to:

Voyage GPO Box 3154 Sydney NSW 2001

The following address Name:

Address:

Cheque should be made payable to: **OFM – Voyage (client name)**

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Proof of identity (optional)

Your existing superannuation provider may require documentation with this transfer request to prove you are the person to whom the superannuation entitlements belong. We encourage you to contact your existing superannuation provider to determine what documentation is required.

I have attached a certified copy of my driver's licence or passport (optional)

Certification of personal document requirements

All copied pages of ORIGINAL proof of identification documents (including any linking documents) need to be certified as true copies by any individual approved to do so (see below). The person who is authorised to certify documents must sight the original and the copy and make sure both documents are identical, then make sure all pages have been certified as true copies by writing or stamping 'certified true copy' followed by their signature, printed name, qualification (eg Justice of the Peace, Australia Post employee, etc) and date.

The following can certify copies of the originals as true and correct copies:

- a permanent employee of Australia Post with five or more years of continuous service
- a finance company officer with five or more years of continuous service (with one or more finance companies)
- an officer with, or authorised representative of, a holder of an Australian Financial Services Licence (AFSL), having five or more years continuous service with one or more licensees
- a notary public officer
- a police officer
- a registrar or deputy registrar of a court
- a Justice of the Peace
- a person enrolled on the roll of a State or Territory Supreme Court or the High Court of Australia, as a legal practitioner
- an Australian consular officer or an Australian diplomatic officer
- a judge of a court
- a magistrate, or a Chief Executive Officer of a Commonwealth court.

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Declaration and signature

I hereby request that the rollover institution named above complete the transfer of benefits from my account/policy to Oasis Fund Management Limited (Trustee) ABN 38 106 045 050 AFSL 274331 RSE L0001755 as trustee of the Oasis Superannuation Master Trust (Trust) ABN 81 154 851 339, RSE R1004939, a superannuation fund established to comply with the requirements of the Superannuation Industry (Supervision) Act. By giving this authorisation to transfer my benefits:

- I hereby give the rollover institution named above authority to provide any and all relevant information to the Trustee.
- I discharge the trustee of my previous fund from any further liability in respect of my superannuation benefit once the transfer to the Trustee has been completed.
- I am aware that I may ask the trustee of my previous fund for information to understand any benefit entitlements that I may have, including information about any fees or charges that may apply to the rollover, or information about the effect of the rollover on any benefit entitlements I may have, and I do not require any further information.
- I authorise the deduction of any withdrawal and/or termination fees that may be applicable as a result of the transfer.

Signature

Date:

Full given name(s):

Surname: