



Investment Nomination Form

This form is used when you want to change or update the way that your superannuation account is invested.

Your Full Name:

Your Address:

Your Date Of Birth:

Your Member Number:

1. Your Instructions

		I want my current account balance to now be invested like this (leave blank if no change)	I want my future deposits into the Fund to be invested like this
Diversified Options	ING Wholesale Managed Growth Trust	%	%
	Colonial First State Diversified Fund	%	%
	Growth Strategy Pool	%	%
	Balanced Strategy Pool	%	%
	Blackrock Wholesale Balanced Fund	%	%
	Colonial First State Wholesale Conservative Growth Fund	%	%
	Conservative Strategy Pool	%	%
	ING Wholesale Capital Stable Trust	%	%
	Sector Options	BT Wholesale International Share Fund	%
MFS Global Equity Trust		%	%
AMP Capital Equity Fund – Class A Units		%	%
Aberdeen Classic Series Australian Shares Fund		%	%
Australian Smaller Companies Strategy Pool		%	%
Challenger Wholesale Socially Responsive Fund		%	%
Challenger Wholesale Property Securities Fund		%	%
Cash Strategy Pool		%	%
Closed Options		Challenger Howard Wholesale Mortgage Fund	%
	ING Wholesale Capital Guaranteed Fund	%	%
	ING Wholesale Emerging Companies Trust	%	%
	Perpetual Wholesale Smaller Companies Fund	%	%
These options are closed to new investments. It is only possible to reduce your holdings in these options.		100%	100%

Your Full Name:

Your Date Of Birth:

Your Member Number:

2. Your Acknowledgement

This authority replaces all previous investment option authorities.

I authorise the Trustee to change my investment options in accordance with this authority.

MEMBER'S DECLARATION:

1. I have received, read and understand the current Product Disclosure Statement for the Taxi Industry Superannuation Fund.
2. I acknowledge that the Trustee, Promoter or Adviser can provide me with the Underlying Investment Fund PDS via the website www.taxisuper.com.au and I agree to receive the Underlying Investment Fund PDS by obtaining it from the website.
3. I have received (either via the website or from the Trustee, Promoter or Adviser), read and understand the Underlying Investment Fund PDS and acknowledge that I may not always have the most current Underlying Investment Fund PDS or updated product disclosures relating to the Underlying Investment Fund at the time additional investments in the Underlying Investment Fund are made for me or an investment switch is made at my request.
4. I acknowledge that the Trustee will invest my superannuation in accordance with my directions set out in this Investment Nomination Form although it reserves the right not to do so where necessary or appropriate.
5. I understand that investments may rise or fall and I acknowledge that the Trustee, the Administrator, and Promoter and any of their associated or related entities do not guarantee the return of capital or the performance of the Taxi Industry Superannuation Fund
6. I understand that past investment returns are not indicative of future performance of the investment option selected.
7. I understand that neither the Trustee nor the Manager are responsible for the investment selection made by me.
8. I understand that this investment nomination is not effective until processed by the Fund Administrator.
9. I understand that this investment nomination can not be altered within 30 days.

3. Your Signature

Member's Signature:

Date:

IMPORTANT INFORMATION

Your investment instructions will not be processed unless both pages of this Investment Nomination Form are provided to the Administrator.