



CHANGE IN NOMINATED BENEFICIARY

Date Stamp (Internal Office Use Only)

Please complete this form with a Black pen using BLOCK letters and send it to:
 WA Local Government Superannuation Plan, PO BOX Z5493 St Georges Tce, Perth WA 6831
 Please fill circles like ● NOT like ⊗ ⊙

→ This form is to advise us of a change in your nominated beneficiaries. These details can be updated on our website: www.walgsp.com.au

Section 1 Your personal details

Client Number	<input type="text"/>	Mr <input type="radio"/>	Mrs <input type="radio"/>	Ms <input type="radio"/>	Miss <input type="radio"/>
Surname	<input type="text"/>				
Given name(s)	<input type="text"/>				
Date of birth (dd/mm/yyyy)	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
Residential Address Line 1	<input type="text"/>				
Residential Address Line 2	<input type="text"/>				
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>
Home Phone incl. area code e.g. 08123456789	<input type="text"/>	Phone (Day)	<input type="text"/>		
Mobile	<input type="text"/>				
Email	<input type="text"/>				
	<input type="text"/>				

Section 2 Change of beneficiary

Please refer to the Product Disclosure Statement for further information. If you wish to change a beneficiary, please complete the following section.

If insufficient space, please attach a separate sheet. Your percentage split across beneficiaries must total 100%.

Beneficiary 1

Surname	<input type="text"/>														
Given name(s)	<input type="text"/>														
Date of birth	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	Gender	<input type="radio"/> Male	<input type="radio"/> Female							
Address Line 1	<input type="text"/>														
Address Line 2	<input type="text"/>														
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>										
Relationship to you (please select one only)	<input type="radio"/> Child	<input type="radio"/> Sibling	<input type="radio"/> Relative	<input type="radio"/> Parent	<input type="radio"/> Spouse	<input type="radio"/> Other									
Please Specify if 'Other'	<input type="text"/>					Percentage Split	<input type="text"/>	%							



