Nominated Beneficiaries

This Nomination form enables you to indicate who you would like to receive any benefits on your death.

IVCM (Aust) Pty Ltd Limited have discretion as to who should receive any death benefits but they will generally look to follow your wishes unless there is clear evidence that your Nomination is no longer appropriate, or there are legislative reasons why they are unable to do so.

Scheme Member's Full Name

IVCM Plan Reference

Please give details of any person you would like to receive any pension death benefits payable in the event of your death. You can also name a charity to receive the death benefits if you so choose.

Please note that this Nomination can be changed at any time either by completion of this form as a standalone document, or by sending a written instruction addressed to the Scheme Supervisor.

NOTE: Where you fail to provide the Scheme Manager with a designated beneficiary, the Scheme Manager would usually look to your estate when considering the distribution of your pension benefits.

Full Name	Address (inc. Post Code)	Relationship to Me	% of Death Benefits

Authorisation of Member

I hereby declare the above to be the beneficiaries I nominate for the Scheme Manager' consideration to receive my benefits in the event of my death.

Sign

Date

Name

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When complete email this form to; newzealand@ivcm.com and post the original to the address shown.