

HESTA for Mercy income stream lump-sum withdrawal form



for mercy super

Use this form to make a lump-sum withdrawal from your HESTA for Mercy Retirement Income Stream or Transition to Retirement Income Stream (if eligible). Please consult a financial adviser before making a decision.

Complete this form if you would like to make a lump-sum withdrawal from your HESTA for Mercy Income Stream account. Type in your details or complete in pen using BLOCK letters. Print 'X' to mark boxes where applicable.

The form must be completed in full. Call us on 1300 368 891 if you have any questions.

1 Personal details Member number: Title: Ms Mrs Miss Mr Dr Other Given name/s: Family name: Date of birth: D D M M Y Y Y Y Postal address: Unit number/Street number	I am aged 60-64 and I have ceased employment, with any employer, since turning age 60" Date left employer: I am aged 65 or more" I wish to withdraw all my unrestricted non-preserved benefits If you have never been employed, preserved benefits cannot be paid until you reach age 65. Please indicate here if you have never been employed "If you meet this requirement, your Transition-to-retirement income stream will be converted to a retirement income stream. Consider getting financial advice about what this means for you before withdrawing. Important note: Your preservation age will be dependent on your date of birth (see 'other information about taxation of benefits' page for your preservation table in Income Stream PDS). Also if you have never been employed, benefits cannot be paid until you			
	reach age 65.			
Street name	4 Partial withdrawal amount			
Suburb	Nominate the amount you wish to withdraw, specifying the investment options from which the withdrawal should be made. Please note, we will not recalculate the amount of your ongoing regular income payments until the next 1 July.			
State/Territory Postcode Phone number: Email:	Note: The minimum partial withdrawal you can make from any investment option is \$1,000 unless you are withdrawing your entire balance. A minimum balance of \$6,000 overall must be maintained in your account after your withdrawal has been processed. If the investment option you specify below does not have adequate funds to complete your request, the amount requested will be drawn from the option with the highest account balance.			
	I wish to withdraw a total of	\$		
2 Nominate withdrawal type	from the investment option(s) specified below:			
Select one option only.	Investment options	Amount		% of total
I would like to rollover my entire income stream account	Conservative	\$		%
balance to another fund – complete sections 5 and 6	Balanced Growth	\$		%
OR I would like to rollover part of my income stream account balance to another fund – complete sections 4, 5 and 6 OR	Indexed Balanced Growth	\$		%
	Sustainable Growth	\$		%
I would like to withdraw my entire income stream account balance – complete sections 3*, 5 and 6 OR	High Growth	\$		%
	Cash and Term Deposits	\$	OR	%
I would like to withdraw part of my income stream account	Diversified Bonds	\$		%
balance - complete sections 3*, 4, 5 and 6	Property and Infrastructure	\$		%
*Only applicable to Transition to Retirement members.	International Shares	\$		%
3 Transition to Retirement members	Australian Shares	\$		%
Transition to Retirement members are only eligible for a cash withdrawal if they can select one of the following options:	TOTAL	\$		%
I have reached preservation age and permanently retired. Date left employer:	Withdrawing money from the Income Stream may have tax	HESTA for Mercy implications. We s		(Total must add up to 100%)

you speak to a financial adviser before making any decisions.

5	Advise us where to pay your withdrawal	6	Member declaration	
•	Select one option only.	•	I declare I am the HESTA for Mercy Super Income Stream member whose details appear on this form.	
OR	I would like my withdrawal paid to the nominated bank account into which my HESTA for Mercy income payments are made	•	I confirm the details I have supplied are true and correct, particularly confirming any declaration in section 3. I request HESTA for Mercy to pay the benefit in accordance with the provisions of the HESTA Trust Deed (subject to any preservation requirements that might	
	I would like to transfer my withdrawal to the rollover fund(s) nominated below*		apply). I have read and understood HESTA's Privacy Collection	
	Fund name:		Statement which is available at hestaformercy.com.au/privacy or by calling 1300 368 891. I consent to my personal information being collected and used by the Trustee for the ongoing administration of my membership by the fund administrator and other service providers.	
	Fund address: PO Box/Unit number/Street number	•	I acknowledge HESTA for Mercy has advised me to consider obtaining financial advice.	
	Street name	•	I understand if I do not provide you with the information requested in this form, you may not be able to accept or carry out my requests or instructions.	
	Suburb	•	I confirm I have read and understood the HESTA for Mercy Income Stream Product Disclosure Statement available at hestaformercy.com.au/pds or by calling 1300 368 891.	
	State/Territory Postcode	Si	ignature:	
	Phone number of new fund:		ate:	
	Fund ABN/ACN (mandatory):			
	Unique Superannuation Identifier (USI):	re m If	eturn your completed form. Scan and email all equirements to information@hestaformercy.com.au or nail to: PO Box 8334, Woolloongabba QLD 4102 you have any questions about completing this form,	
	Electronic service address (ESA): (self managed super funds only)		all us on 1300 368 891 between 8.30am and 5.00pm (AEST). /e cannot accept faxed requests.	
	Superannuation Product Identification Number (SPIN):			
	New fund member number (mandatory):			
	*A rollover fund can be a superannuation fund or another income stream. If you have nominated more than one rollover fund, please attach details of each fund to this form and the proportion (percentage) of the payment that should be allocated to each.			

contact us

1300 368 891 | Email forms to information@hestaformercy.com.au or mail to: HESTA for Mercy, PO Box 8334, Woolloongabba, QLD 4102