



October 2019

Insurance election for low balances

Use this form if your balance is under \$6,000 and you'd like to elect to keep insurance in your account. We'll need to receive your completed form by 20 March 2020.

You can also use this form if you'd like to opt in to maintaining your cover even if you don't receive a contribution into your account for a period of 16 months (inactivity).

How to complete this form

Complete your details in the boxes below, sign and date the form, and return it to:

Email: clientfirst@myexpand.com.au

Post: eXpand, GPO Box 264, Melbourne VIC 3001

Account number

Product name

Title (Dr/Mr/Mrs/Ms/Miss) Surname

Given name(s)

Date of birth / /

Email address

Declaration (please tick ✓)

I elect to maintain my insurance cover even if my super balance is below \$6,000.

AND/OR

I elect to maintain my insurance cover even if I don't receive a contribution for a period of 16 months.

My cover will continue, and premiums will continue to be deducted from my super account. I acknowledge I can cancel my cover at any time.

Signature

Date / /

Please forward all correspondence and enquiries to

Post: eXpand
GPO Box 264, Melbourne VIC 3001

Email: clientfirst@myexpand.com.au

Telephone: 1800 517 124

Web: www.myexpand.com.au