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<b>Address</b>	Level 24, 68 Pitt St Sydney NSW 2000
<b>Phone</b>	1300 048 135
<b>Email</b>	help@humanfinancial.com.au
<b>Website</b>	humanfinancial.com.au

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Human Financial Managed Investments

# Change of details form

## Purpose of this form

Use this form to make changes to personal details on your Managed Investments account.

**Did you know?** You can update your email, contact numbers and address online at [humanfinancial.com.au](https://humanfinancial.com.au).

If you need any assistance in completing this form, please call us on **1300 048 135**.

## Section 1: Current member details

Account number or SRN

e.g. TINV / 123456, I00000123456

Account number or SRN

e.g. TINV / 123456, I00000123456

**Note:** If you have more than one account, we'll make the changes in this form to each account.

Title (Investor)

Mr      Mrs      Miss      Dr      Other

Gender

Male      Female      Other

\*Date of birth

DD MM YYYY

Given name(s)

Surname

Contact number

Email

Account name (for Company, Trusts or Partnerships)

## Section 2: New member details

**Please note:** we are unable to accept your financial adviser's address.

### New postal address

Street number and name or PO Box

Suburb

State

Postcode

Country (if other than Australia)

## New residential address

**CROSS** this box if the address is the same as the postal address above

Street number and name or PO Box

Suburb

State

Postcode

Country (if other than Australia)

Home number

Mobile phone number

Email address

Position title (optional)

## Section 3: Change of name

If your name has changed, **please write your new name below and attach an original certified copy** showing your change of name, such as a Change of Name Certificate.

Title            Mr                    Mrs                    Ms                    Dr                    Other

Given name(s)

Surname

Original signature of member

New signature of member

Date

DD MM YYYY

## \*Section 4: Member declarations and signature

By signing this request form, I/we make the following statements:

- declare that all the details given in this form are true and correct; and
- declare that, if signing under a power of attorney, I/we verify that, at the time of signing, I/we have not received a notice of revocation of that power.

We are committed to handling your personal information in accordance with the *Privacy Act 1988 (Cth)*. Read our Privacy Policy on our website at [humanfinancial.com.au/privacy](http://humanfinancial.com.au/privacy) for more information.

Full name (print clearly in block letters)

Type of investor

Individual      Joint investor      Director      Sole director and sole company secretary  
Trustee      Partner      Power of Attorney

Signature

Date

DD MM YYYY

**Note:** If signing under a power of attorney, please provide an original certified copy of the power of attorney.

### Sending your form

Please send this form to us via email or mail.

#### Mailing address      Email address

Human Financial      help@humanfinancial.com.au  
Level 24, 68 Pitt Street  
Sydney NSW 2000

If you have any questions or need help, please call us on **1300 048 135**.