

Nomination of Beneficiaries Form

As the Policyowner, you have the option to nominate up to 5 beneficiaries to receive benefits payable under your Policy on your death. The option to nominate a beneficiary is subject to the conditions listed below.

If you choose not to nominate a beneficiary using this form, or do not submit a valid nomination (explained below) any benefit payable from your Policy will be settled in accordance with provisions outlined in your Product Disclosure Statement and the Life Insurance Act 1995.

Conditions

The following conditions apply:

- Only the Policyowner can sign the Nomination of Beneficiaries Form; and
- You can nominate a maximum of 5 beneficiaries under your policy; and
- Nominations must be a natural person; and
- If a nominee pre-deceases you, the portion otherwise payable to them will be payable to your estate; and
- If at time of payment, a nominated beneficiary is a minor, the payment will be made to the minor's legal guardian or trust for the benefit of the minor; and
- Payment of benefits will be made on the basis of the latest valid nomination received by us prior to the death of the policy owner; and
- You may vary the nomination at any time by calling us on **1300 513 483** (Monday to Friday between 8am and 8pm AEST) or by properly completing and signing a new Nomination of Beneficiaries Form and returning it to Kogan Life Insurance. The variation takes effect when it is received by Kogan Life Insurance.

Helpful tips when completing the Nomination of Beneficiaries Form

- If you make an alteration or correction to the Form, please ensure you initial each change.
- Please note that when completing the Proportion of Benefit Section, it must equal 100%; we cannot accept dollar amounts, fractions, or statements such as 'All', 'Half', or 'The Rest'.
- We require complete phone numbers for all nominees, except if they are under 18 years of age.
- We are unable to accept any additional instructions on the Form, other than the fields included.

Example of how to nominate a Beneficiary(ies)

Full Name of Beneficiary	Address	Phone Number	Date of Birth	Relationship to Policyowner	Proportion of Benefit
Mr Travis Smith	1 Sample Street, Smithville NSW	02 1234 5678	01/05/1980	Brother	30%
Ms Sarah Jones	35 Sample Street, Smithville NSW	02 5678 1234	30/06/1995	Daughter	70%
			/ /		%
			/ /		%
			/ /		%
Your Policy Number	750123456			Total (must add up to 100%)	100%
Name of Policyowner	Mrs Sandi Jones				
Signature of Policyowner	Sandi Jones			Date	11/06/2020

Nomination of Beneficiaries Form

Privacy

Greenstone Financial Services Pty Ltd ('GFS', 'we', 'us' or 'our') collects the following personal information in order to record your nominated beneficiaries and to assist in the management of future claims. You confirm that you have gained consent from the individuals to provide this information. This information will be shared with your insurer and any of its service providers, including claims assessors should you lodge a claim under your Policy. If you fail to provide the requested information, or do not provide the information in full, your nomination will be deemed invalid and will not be processed. We are unlikely to send your information to any foreign jurisdiction. You can obtain a copy of our Privacy Policy, which contains information about accessing and correcting information and how to complain about a breach of the Privacy Principles, on our website or you can request a copy by contacting us on **1300 513 483** (Monday to Friday between 8am and 8pm AEST).

Full Name of Beneficiary	Address	Phone Number	Date of Birth	Relationship to Policyowner	Proportion of Benefit
			/ /		%
			/ /		%
			/ /		%
			/ /		%
			/ /		%
Your Policy Number	Total (must add up to 100%)				%
Name of Policyowner					
Signature of Policyowner				Date	/ /

Please return this form to Kogan Life Insurance. Email to: service@koganlifeinsurance.com.au, mail to: Customer Support, Reply Paid 6728, Baulkham Hills NSW 2153 (no stamp required) or fax to: 1300 259 681