



**prosuper**

**pro-super australia Pty Ltd**

A.C.N 097 625 235  
level 19, 10 eagle street  
brisbane qld 4001  
gpo box 26  
brisbane qld 4001

**freecall 1800 641 146**  
**freefax 1800 024 831**  
**prosuper@prosuper.com.au**

**Change of Trustee Order Form**

From:

Firm:

Phone:

e-mail:

**FUND DETAILS**

Name of Fund:

Date of the Original Deed:

Date of Last Amendment (if applicable):

Meeting Address:

**Would you like the trust deed updated at this time? (Additional cost of \$55)**      **Yes** (If yes, a Deed of Amendment Order Form is not needed.)      **No**

**RESIGNING TRUSTEE DETAILS**

**For Corporate Trustees:**

Company Name:

**A.C.N.**

Registered Office Street Address:

Names of Directors:

**For Individual Trustees: (PLEASE INDICATE 'DECD' IN CASES OF DECEASED TRUSTEE)**

Names of Trustees:

Street Address: (or indicate DECD)

**CONTINUING TRUSTEE DETAILS**

Names of Trustees:

Street Address:



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**Change of Trustee Order Form**  
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**NEW TRUSTEE DETAILS**

**For Corporate Trustees:**

Company Name: A.C.N.  
 Registered Office Street Address:  
 Names of Directors:

**For Individual Trustees:**

Names of Trustee(s): Street Address:

**MEMBER DETAILS**

Names of Members:

**Is the current Deed a Pro-Super Deed?    Yes    No**  
**If not, please provide a copy of the original trust deed and the most recent amendment if applicable.**

**Payment Details if paying by credit card:**

Please debit the following credit card by the amount of \$

TYPE OF CARD:            Visa            MasterCard

CARD NUMBER:

NAME ON CARD:

EXPIRY DATE:

SIGNATURE:

**Instruction Requests:**

Deed Preparation: For your convenience we can hole punch the Deeds or attach a file strip to the spine. Please select from the following options:

File strip    3hp    2hp    No hp/no file strip

Please send soft copies