

# Withdrawal request

INVESTSMART

## Full withdrawal request

As per the below signatures, I/we authorise InvestSMART to conduct a **FULL** cash withdrawal and account closure of my/our cash and securities holdings for the SMA/PMA account listed below. All proceeds should be deposited into the nominated bank account.

Full withdrawal request	
SMA/PMA portfolio number	
SMA/PMA portfolio name	

I/we understand that this will involve the selling of all existing securities in the SMA/PMA account.

Signature of Account Holder 1	Signature of Account Holder 2 (if applicable)
Full Name of Account Holder 1	Full Name of Account Holder 2 (if applicable)
Date	Date

Please return this completed form by email to [invest@investsmart.com.au](mailto:invest@investsmart.com.au). Please note that only requests received **before 2pm AEDT** will be actioned the following business day.