



# Deceased Estate Withdrawal

Complete this form to close the BWA Cash Management Account of a deceased estate and/or transfer funds to a new BWA Cash Management Account or to a beneficiary.

## 1. CLIENT SERVICES

Please post this form to: BWA Managed Investments  
GPO Box 2515  
Perth WA 6001

## 2. CASH MANAGEMENT ACCOUNT

Please provide the deceased estate CMA Account details. Please Note: Supporting documentation is required. Contact the Client Services Team for further information.

CMA Account Name

BSB

CMA Account Number

## 3. CONTACT INFORMATION

Please provide your contact details.

Name

Telephone Number

## 4. WITHDRAWAL INFORMATION

Is this a full withdrawal?

No

If No, please state amount

\$

Yes

If Yes, would you like to close this account?

Yes

No

## 5. BANK TRANSFER INFORMATION

Please complete this section to make a bank transfer.

Bank building society or credit union name

Branch Address

BSB and Account Number

Account Name

## 6. CHEQUE INFORMATION

Please complete this section to draw a bank cheque(s). Normal fees will apply.

Payable to

1.

\$

2.

\$

3.

\$

Please Note: 'Not Negotiable' bank cheques drawn will be sent to the Estate's mailing address.

## 7. SPECIAL INSTRUCTIONS


## 8. EXECUTOR(S)/SIGNATURE(S)

Name/CMA Account Signatory 1/executor\*


Name/CMA Account Signatory 2/executor\*


Signature/CMA Account Signatory 1/executor\*

X
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Signature/CMA Account Signatory 2/executor\*

X
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Date

□□	/	□□	/	□□	□□
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Date

□□	/	□□	/	□□	□□
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\*Delete as applicable.

## 9. CERTIFICATION

I, 

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 of 

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hereby certify that the above signatures as indicated are those of executor(s) of the estate/late

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Signature/Solicitor/Justice of the Peace

X
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If you need help completing this form please contact our Client Services Team

Client Services: 1300 663 117

Email: [support@bwami.com.au](mailto:support@bwami.com.au)

<b>Office Use Only</b>	Signature verified:	Entered by:	Staff No:	Date entered:
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