

# 100F

30 November 2019

### Financial Adviser Authority

Please complete this form to authorise your financial adviser and/or their staff to operate your account. You can also use this form to nominate your bank account details for withdrawal payments. **Do not use this form to APPOINT or CHANGE your existing financial adviser.** 

By providing this authority, you authorise your financial adviser and/or their staff to give instructions in relation to your account. This may include submitting a switch or reweight instruction, establishing or changing investment instructions or making online withdrawals (where applicable) from your account to your nominated bank account.

#### Important note:

- This form must be completed by both you and your financial adviser.
- Please complete Part A for Individual Investor in Superannuation, Allocated Pension, Term Allocated Pension and Investment Service, or Joint Investors in Investment Service.
- Please complete Part B for Corporate Investor (including Corporate Trustee), Trust (Individual Trustee(s)), Self-managed Superannuation Fund, Incorporated/Unincorporated Club/Body or Deceased Estate.
- To allow your financial adviser and their staff to conduct online withdrawals on your behalf, all steps must be completed.

Please complete these instructions in BLACK INK using CAPITAL LETTERS (except for your email address) and ✓ boxes where provided.

Step 1: Your details																				
Account number							-		_											
Part A – Individual Investor or Joint Investors																				
Applicant/Investor 1				1																
Title (Dr/Mr/Mrs/Ms/Miss)						Sur	name	2												
Given name(s)																				
Address																				
Suburb													Sta	ite		Pos	stco	de		
Phone (work)												Pho (hom								
Phone (mobile)																				
Email*																				
Date of birth		/			/											·				

<sup>\*</sup> To receive confirmation of instructions submitted on Portfolio Online, please supply your email address.

Applicant/Investor 2 (for joint investors only)																											
Title (Dr/Mr/Mrs/Ms/Miss)							Sı	ırna	me																		
Given name(s)																											
Address																					1			<u></u>	<u></u>		
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Email*		<u></u>																									
Date of birth			/			/																					
* To receive confirmation of instructions submitted on Portfolio Online, please supply your email address.																											
Part B – Corporate Investor (including Corporate Trustee), Trust (Individual Trustee(s)), Self-																											
managed Superan	nua	atio	n F	un	ıd,	Inc	or	001	rate	ed/	Un	inc	orp	or	ate	ed	Clu	<b>b</b> /l	Во	dy	or l	De	cea	ise	d E	sta	te
Name of Entity/Company																											
Name of Trust																											
Name of Contact Pers	son																										
T:41- (D., /A.4 /A.4 /A.4)							C.																				
Title (Dr/Mr/Mrs/Ms/Miss)							St	ırna	me																		
Given name(s)						] ,					]																
Date of birth	Date of birth																										
Step 2: Financial	ac	ivk	sei	r <b>d</b>	eta	ails	5																				
Dealer name																											
Financial adviser name																											
Contact name																											
AFS licence number													Fina	ncia	l adv num												

### Step 3: Proof of identity (Financial adviser to complete)

We are required to carry out proof of identity procedures before withdrawing any funds. These requirements arise under AML/CTF Legislation. For further information on the types of proof of identity which can be attached or verified and retained, please refer to the `Completing Proof of Identity' document on ioof.com.au. It also includes a list of persons authorised to certify copies of original documents.

Declaration by financial ad	vise	r																								
I confirm that																										
I have previously supplied IOOF with proof of identity documents for the above named client and the documents are still current.																										
OR																										
I have completed and sig	_							fication	on fo	orm(s	5), W	hich	is at	tach	ed t	o th	is Ap	opli	catio	on (a	nd re	etain	ied a	cer	tified	ł
copy of the applicant's id	denti	ificat	tion (	docu	umei	nt(s))	;																			
OR																										
I have attached original							licant's	iden	tifica	ation	do	cum	ent(s	s) wi	th th	is fo	rm,	con	npul	sory	whe	ere:				
• the applicant is a Pol						n or																				
• the applicant is not re	esiai	ng ir	1 Aus	traii	la																					
OR																										
I have sighted and retain of identity table ( <b>Please</b>													ume	ent(s	) rec	ord	ed ir	the	e foll	owir	ng R	ecor	d of p	oroc	of	
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Account name																										
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Please note the account must be held either solely or jointly in your name.

### Step 5: Investor(s) declaration

I hereby **authorise** my financial adviser and their staff, as my agent, to do the following:

- . operate and to give instructions on my behalf in relation to my IOOF account by any method acceptable, including electronically
- submitting a switch or reweight instruction, establishing or changing investment instructions; and
- requesting withdrawals (where applicable) from my account to my nominated bank account.

This authority **does not authorise** my financial adviser to:

- change the name on my account
- authorise any change in fees and charges
- sign any form on my behalf where the law or an external party requires my signature on the form
- or authorise any other person to operate my account.

Part A – Individual Investor or Joint Investors

**Important note:** The Trustee/Service Operator collects the information in this form for the purpose of updating the information it holds about you. Any personal information provided in this form will be handled in accordance with the Privacy Policy at www.ioof.com.au/privacy. If you do not provide all of the requested information, we may not be able to action your request.

I accept the terms outlined below:

- I release and indemnify the Trustee/Service Operator and any member of the IOOF Group from and against all demands, action, proceedings, losses, liabilities and costs arising directly or indirectly out of or in connection with the Trustee/Service Operator acting or omitting to act on instructions given by my financial adviser or by the appointed representative in 'Step 2' under this authority;
- I authorise the Trustee/Service Operator to continue to follow instructions given under this authority until the Trustee/Service Operator receives notice in writing signed by me to cancel the authority.

### Signatory 1 Date Full name Signatory 2 (if applicable) Date Full name Part B - Corporate Investor (including Corporate Trustee), Trust (Individual Trustee(s)), Self Managed Superannuation Fund, Incorporated/Unincorporated Club/Body or Deceased Estate Signatory 1 Date Title (such as Director/Sole Director/Company Secretary) Signatory 3 (for additional Date Trustees if applicable) Title (if applicable) Full name Signatory 4 (for additional Date Trustees if applicable) Title (if applicable) Full name Common seal

Please sign and return this form to

(of company) if required

Post GPO Box 264 Melbourne VIC 3001

Telephone 1800 913 118

Email clientfirst@ioof.com.au Web www.ioof.com.au

## Proof of identity requirements

AML/CTF law obligates the Trustee to verify the identity of each applicant before providing financial services to them.

To meet these requirements you must provide either a certified copy of A or B as below:

#### **EITHER A**

#### ONE of the following documents only:

- current driver's licence issued under State or Territory law
- passport

#### OR B

#### ONE of the following documents:

- birth certificate or birth extract
- citizenship certificate issued by the Commonwealth
- pension card issued by Centrelink that entitles the person to financial benefits

#### AND

#### ONE of the following documents:

- letter from Centrelink regarding a government assistance payment
- notice issued by Commonwealth, State or Territory government or local council within the past 12 months that contains your name and residential address (such as Tax Office Notice of Assessment or rates notice from local council).

## Have you changed your name or are you signing on behalf of another person?

If you have changed your name or are signing on behalf of the applicant, you will need to provide a certified linking document. A linking document is a document that proves a relationship exists between two (or more) names.

### The following table contains information about suitable linking documents.

Purpose	Suitable linking documents
Change of name	Marriage certificate, deed poll or change of name certificate from the Births, Deaths and Marriages Registration Office
Signed on behalf of the applicant	Guardianship papers or Power of Attorney

#### Certification of personal documents

All copied pages of ORIGINAL proof of identification documents (including any linking documents) need to be certified as true copies by any individual approved to do so (see below).

The person who is authorised to certify documents must sight the original and the copy and make sure both documents are identical, then make sure all pages have been certified as true copies by writing or stamping 'certified true copy' followed by their signature, printed name, qualification (such as Justice of the Peace, Australia Post employee) and date.

The following can certify copies of the originals as true and correct copies:

- Chiropractor
- Dentist
- Legal practitioner
- Medical practitioner
- Nurse
- Optometrist
- Patent attorney
- Pharmacist
- Physiotherapist
- Psychologist
- Trade marks attorney
- Veterinary surgeon

#### Other persons:

- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- Australian Consular Officer or Australia Diplomatic Officer (within the meaning of the Consular Fee Act 1955)
- Bailif
- Bank officer with two or more continuous years of service
- Building society officer with two or more years of continuous service
- Chief executive officer of a Commonwealth court
- Clerk of a court
- Commissioner for Affidavits
- Commissioner for Declarations
- Credit union officer with two or more years of continuous service
- Employee of the Australian Trade Commission who is:
  - in a country or place outside Australia; and
  - authorised under paragraph 3(c) of the Consular Fees Act 1955; and
  - exercising his or her function in that place
- Employee of the Commonwealth who is:
  - in a country or place outside Australia; andauthorised under paragraph 3(d)
  - of the *Consular Fees Act 1955*; and

    exercising his or her function in that place
- Fellow of the National Tax Accountants'
   Association
- Finance company officer with two or more years of continuous service
- Holder of a statutory office not specified in another item in this list
- Judge of a court
- Justice of the Peace

- Magistrate
- Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the Marriage Act 1961
- Master of a court
- Member of Chartered Secretaries Australia
- Member of Engineers Australia, other than at the grade of student
- Member of the Association of Taxation and Management Accountants
- Member of the Australian Defence Force who is either:
  - an officer; or
  - a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with two or more years of continuous service; or
  - a warrant officer within the meaning of that Act
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- Member of either:
  - the Parliament of the Commonwealth; or
  - the Parliament of a State; or
  - a Territory legislature; or
  - a local government authority of a State or Territory
- Minister of religion registered under Subdivision A of Division 1 of Part IV of the Marriage Act 1961
- Notary public
- An officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more years of continuous service with one or more licences
- Permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public
- Permanent employee of:
  - the Commonwealth or a Commonwealth authority; or
  - a State or Territory or a State or Territory authority; or
  - a local government authority; with two or more years of continuous service who is not specified in another item in this list
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Police officer
- Registrar, or Deputy Registrar, of a court
- Senior Executive Service employee of either:
  - the Commonwealth or a Commonwealth authority; or
  - a State or Territory or a State or Territory authority
- Sheriff
- Sheriff's officer
- Teacher employed on a full-time basis at a school or tertiary education institution
- Member of the Australasian Institute of Mining and Metallurgy