IOOF
PENSION

1 July 2019

Family Fee Aggregation Application

Complete the following form to apply for Family Fee Aggregation across IOOF Pension and IOOF Personal Super.

Terms and conditions

- Each person applying to link for the purposes of Fee Aggregation must be a member of the same immediate family (such as spouse, son, daughter, de facto, partner, father, mother, brother or sister and spouses of immediate family members) including multiple accounts for the same person.
- Any new Family Fee Aggregation nomination will override any previous nomination.
- A maximum of six accounts are allowed to be linked together for Family Fee Aggregation purposes.
- Accounts nominated for Family Fee Aggregation within the same group must be associated with the same financial adviser.
- A Family Fee Aggregation request can be rejected and a linking can be cancelled at any time by us.
- Family Fee Aggregation **does not apply** to MySuper members.
- Each linked member will be able to view information about the other Family Fee Aggregation members online, including names, account numbers, commencement dates and annual administration fee discounts for the year.

The Trustee collects the information in this form for the purpose of updating the information it holds about me. The information provided in this form will be used in accordance with the privacy policy at www.ioof.com.au/privacy.

Please ensure that each linked member/investor, (including yourself) completes and signs this form, and that each member/investor has read and understood the terms and conditions of this form and the information in the relevant PDS or Offer Document.

Please complete these instructions in BLACK INK using CAPITAL LETTERS and ✓ boxes where provided.

Linked member

Title (Dr/Mr/Mrs/Ms/Miss) Surname

Given name(s)

Account number (if known)

Date of birth / /

Relationship to group (such as spouse)

Declaration: I have read the current PDS and the terms and conditions of Family Fee Aggregation. I apply for my account(s) to be linked to other parties detailed on this form for the purpose of calculating the Administration Fee, and warrant that the information. I have disclosed in this form is true and correct.

Signature Date / /

Linked member

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Surname

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Signature

Date / /

Please forward all correspondence and enquiries to

Applications and forms

Post IOOF Pension, Reply Paid 264 Melbourne VIC 8060
Email clientfirst@ioof.com.au
Fax 03 6215 5800

Enquiries

Telephone enquiries 1800 913 118
Email enquiries clientfirst@ioof.com.au