



5 October 2021

Family Member Application – IOOF Personal Super

This form is to be completed by you, an existing member of IOOF Employer Super, and the family member who wishes to become a member of IOOF Personal Super. Before completing this form, the Trustee or your licensed financial adviser is obliged to give you the IOOF Personal Super Product Disclosure Statement (PDS) which is a summary of important information. The PDS will help you to understand the product and decide if it is appropriate to your needs. Family Members are eligible to receive the same fees and features that you already enjoy through your IOOF Employer Super account (please note: discounted fees don't apply for MySuper members).

Eligibility: An immediate family member includes a spouse (whether of the same sex or a different sex), child, sibling or parent of an employer sponsored member. For information on whether you are eligible to claim a spouse tax offset, please visit the Australian Tax Office superannuation website (www.ato.gov.au) or phone 13 10 20.

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

Step 1: Existing member employer details

Employer/company name

Employer code

Step 2: Existing member details

Account number

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

Given name(s)

Step 3: Family member details

Relationship to member Spouse Child Sibling Parent

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

Given name(s)

Tax file number - -

Residential address

Suburb State Postcode

Mailing address (if different from above)

Suburb State Postcode

Phone (home) Phone (work)

Mobile

Email

Date of birth / / Gender Male Female

Occupation

If you are residing overseas you must complete and submit

- an Overseas Investor form (www.ioof.com.au)
- Certified copies of your identification documents

Please provide your tax file number (TFN) when acquiring this product. Under the **Superannuation Industry (Supervision) Act 1993**, we are authorised to collect your TFN, which will only be used for lawful purposes and in accordance with the **Privacy Act 1988**. It is not an offence if you choose not to provide your TFN, but providing it has its advantages, including:

- we will be able to accept all permitted contributions
- other than the tax that may ordinarily apply, you will not pay more tax than you need to, and
- it will be easier to find different super accounts in your name.

We require your TFN in order to process your Personal Superannuation Application

Anti-Money Laundering (AML) and Counter-Terrorism Financing (CTF)

In accordance with Anti-Money Laundering (AML) and Counter-Terrorism Financing (CTF) Law, please advise the following:

(Note: Your application cannot be processed unless this section is completed and you may be requested to provide additional information and documentation to facilitate IOOF's compliance with AML/CTF Law).

Politically Exposed Person

Politically Exposed Persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates.

Are you a Politically Exposed Person?

Yes No

If you have nominated yourself to be a Politically Exposed Person, you must complete and attach:

- a Politically Exposed Persons form (www.ioof.com.au)
- certified copies of your identification documents

Step 4: Contribution eligibility requirement (family member to complete)

I am under 67 years of age

OR

I am over 67 and under 70 years of age. I have worked at least 40 hours over 30 consecutive days during this financial year.

OR

I am over age 67 and under age 75 years and I am contributing this financial year under the one-off exemption from the (above) work test.

OR

Only mandated contributions (SG or award) will be made to this account.

OR

I am over 65 years of age and I am making a downsizer contribution. (You must provide us with a completed ATO downsizer contribution form before or at the time of making your downsizer contribution. The form is available from the ATO website.)

Details of the contribution included with this application:

| | | |
|---------------------------------------|----|----------------------|
| Rollovers/transfers | \$ | <input type="text"/> |
| Personal contribution ¹ | \$ | <input type="text"/> |
| Salary sacrifice contribution | \$ | <input type="text"/> |
| Superannuation guarantee contribution | \$ | <input type="text"/> |
| Spouse contribution | \$ | <input type="text"/> |
| Downsizer contribution ² | \$ | <input type="text"/> |
| Total contribution amount | \$ | <input type="text"/> |

1 If you want to claim a tax deduction for your personal contribution, please complete a Tax Deduction Notice form which can be obtained from our website.

2 You must provide us with a completed ATO downsizer contribution form before or at the time of making your downsizer contribution. The form is available from the ATO website.

Important note:

For initial contributions equal to or more than \$2 million you must also complete and attach:

- a High Threshold Transaction form (www.ioof.com.au)
- certified copies of your identification documents

Step 5: Nomination of beneficiaries

Your family member may complete a Binding Death Benefit Nomination form or a Non-Binding Death Benefit Nomination form available in this document, from our website or by contacting ClientFirst. Otherwise, in the event of your family member's death, any benefits will be paid to his/her Legal Personal Representative on behalf of their estate.

Step 6a: Deposit Instruction

You are required to make an investment choice as part of your application. If you have not made a decision about your Deposit Instruction, you can choose to invest in the Cash Account until you make another investment choice.

Please note the Deposit instruction, Cash Account preferences and Income preferences all form part of your Standing Instructions.

Listed investments and Term deposits do not form part of your Standing Instructions.

For more information on Standing Instructions, please refer to the IOOF General Reference Guide (IOF.02).

Please advise us of your Deposit Instruction.

Please note:

- Please ensure that the Deposit Instructions includes at least the default minimum allocation of 1% against the Cash Account for Choice members. The percentages allocated to the Cash Account and your selected investment option(s) must add up to 100%.
- For a full list of investment options available for selection within IOOF Employer Super go to our website, select from the **IOOF investment guide (IOF.01)** and list your selections in the space provided.
- To ensure the investment option selections are listed correctly please add the APIR code along with the name of the investment option.
- Term deposits and listed investments cannot form part of your Deposit Instruction. Please refer to Step 6b and 6c to provide these instructions.

Cash Account

OR

Deposit Instruction

| APIR Code | Investment option | Allocation (%) |
|----------------------------|--------------------------|----------------------|
| <input type="text"/> | Cash Account (Mandatory) | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
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| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total (must = 100%) | | <input type="text"/> |

- **Your application cannot be processed unless this section is completed.**
- **If you require more space, please go to our website and download the New Member Investment Authority form.**

Step 6b: Listed investments

Please provide details of any listed investments you would like to purchase as part of your initial application.

Minimum trade is \$2,000 per listed investment.

| ASX code | Units | OR | Investment amount | At market price | OR | At maximum price (\$) |
|----------------------|----------------------|----|-------------------------|----------------------|----|-----------------------|
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | | \$ <input type="text"/> | <input type="text"/> | | <input type="text"/> |

Please note:

- If additional investments and/or listed investments are required, attach a separate signed sheet.
- These investments cannot form part of your Standing Instructions.
- The maximum per listed investment is 30% of your account balance, with no more than 95% of your account balance invested in listed investments
- The maximum buy price will be valid for 30 days, after which the amount for the purchase of your selected listed investments will be retained in your Cash Account until we receive further instructions from you.

Step 6c: Term deposits (minimum \$5,000)

Please provide details of any term deposits you would like to purchase as part of your initial application.

| | | | |
|--------|----------------------|--------|-------------------------|
| Months | <input type="text"/> | Amount | \$ <input type="text"/> |
| Months | <input type="text"/> | Amount | \$ <input type="text"/> |
| Months | <input type="text"/> | Amount | \$ <input type="text"/> |
| Months | <input type="text"/> | Amount | \$ <input type="text"/> |

Please select your provider (if no selection is made, Adelaide Bank will be used)

Adelaide Bank
 NAB
 ANZ

Please note:

- 3, 6 and 12 month terms are offered.
- The maximum overall investment is 95% of your account balance.

Where an investment instruction for a term deposit or listed investment is made at the same time as a new application, these investment instructions will be processed before any other Investment Instructions relating to this new account are processed.

Step 7: Cash Account preferences

Cash Account limits

You must maintain a minimum percentage allocation to the Cash Account.

Please specify one of the following options:

Cash Account default minimum of 1%

OR

Cash Account percentage nominated in your Deposit Instruction

OR

Custom Cash Account minimum of %

Optional: You may also nominate a dollar based cap on the amount held in your Cash Account, subject to a \$5,000 minimum.

To set a Cash Account cap, please specify the amount here \$

Cash Account top-up

If the balance in your Cash Account is zero or below, the Trustee will top up the balance to the lower of:

- the Cash Account default minimum of 1% or the Cash Account percentage nominated in your Deposit Instruction; or
- the Cash Account cap

We will top up your Cash Account balance by redeeming the necessary amount from your managed investments (without prior notice to you) in accordance with the method you have selected below:

Pro-rata (default option) – Redeem funds across all managed investments according to the proportion of the portfolio that they represent.

OR

Redemption instruction – percentage – Redeem funds from specified managed investments according to the percentage allocation nominated below.

OR

Pecking Order – Redeem funds from my managed investment(s) according to a prioritised list specified below.

If you don't indicate a top-up method, the default option of pro-rata will be applied.

Redemption instruction – percentage and pecking order

Please note:

- If you select the pecking order option, please specify which managed investments are to be used and the pecking order in which the funds are to be redeemed, one at a time.
- If you select to have a percentage redemption instruction, the percentages allocated for your selected investment option(s) must add up to 100% not including the Cash Account.
- To ensure the investment option selections are listed correctly, please add the APIR code along with the name of the investment option.
- Restricted investments, investment options with extended redemption periods, capital guaranteed income/pension investment options and annuity funds and term deposits (maturing investments) cannot form part of your redemption instruction - percentage.

| APIR Code | Investment option | Allocation (%) | Pecking order |
|--|----------------------|----------------------|---------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 1 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 2 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 3 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 4 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 5 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 6 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 7 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 8 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 9 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | 10 |
| Redemption Instruction % total (must = 100%) | | <input type="text"/> | |

Step 9: Income preferences

I direct the Trustee to manage income distributions that I receive from managed investments as follows:

Re-invest (default option) – Re-invest 100% of the income distributions back into the same managed investment that made the income distribution.

OR

Retain in Cash Account – Leave all income distributions to accumulate in my Cash Account.

OR

Income Instruction – percentage – Re-invest the income into managed investments selected below.

If you have selected the Income Instruction - percentage, please specify which managed investments are to be used and the respective allocations. Please ensure that the Income Instruction does not contain listed or maturing investments.

If you don't indicate your income preference, the default option of re-invest will be applied.

Income instruction – percentage

| APIR Code | Investment option | Allocation (%) |
|----------------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
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| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total (must = 100%) | | <input type="text"/> |

Step 10: Automatic Re-weight Facility

Use this to automate a re-weight of all the eligible investments in your portfolio, according to a percentage-based instruction at a set frequency.

I direct the Trustee to manage my portfolio as follows:

Re-weight frequency (choose one):

Quarterly Half-yearly Yearly

Commencement date (will commence on the 20th of the chosen month):

/

Please note that if the portfolio contains investment options which cannot be selected as part of a Re-weight (for example maturing investments or investments which cannot be sold), the Re-weight preference submitted will be applied to the remaining investments within the portfolio.

Please ensure that the Re-weight preference includes at least the default minimum allocation to the Cash Account. The default Cash Account minimum is 1%.

Re-weight preference:

Deposit Instruction: Re-weight my portfolio in accordance with my Deposit Instruction in Step 4a.

OR

Re-weight Instruction: Re-weight my portfolio in accordance with my Re-weight Instruction specified in the table below.

If you have selected the Re-weight Instruction option, please specify which investments are to be used and the respective allocations. Please list all investments in your portfolio below.

| APIR code or ASX code | Name of investment option | % allocation |
|-----------------------|---------------------------|----------------------|
| <input type="text"/> | Cash Account | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total | | <input type="text"/> |

Must add up to 100% including the Cash Account allocation

Step 11: Fees for financial advice

- IOOF Investment Management Limited (IIML), as trustee of your super fund, is required to obtain specific written consent before a fee for financial advice can be deducted from your account. You are not under any obligation to consent to the fee being deducted.
- You may revoke your consent at any time by contacting IIML via the options at the end of this form. Once your consent is revoked, no further fees will be deducted from your account however any amounts paid before you revoke your consent will not be automatically refunded.

Choose your fee option(s) by completing the relevant sections below. Fees should be provided including GST. All relevant items in each fee section must be completed. Blank boxes will default to nil.

If you are selecting a Member Advice Fee – Ongoing, Member Advice Fee – Upfront or Member Advice Fee – Insurance please provide your consent end date below:

The start date is optional, if no start date is provided fees will commence on the date this form is processed with the start date applying to all ongoing advice fees. This form must be signed no more than 90 days prior to the start date.

Consent End Date

Start date (optional) / /
 Consent end date (required) / /

The consent end date is the date when all ongoing advice fees will end if we have not received your consent to continue. Your consent to an ongoing fee arrangement ends 150 days after the next anniversary date.

(1) Member Advice Fee – One-Off

A maximum of 10% of the account balance up to a fee of \$11,000 (inclusive of GST), OR a maximum fee of \$3,300 (inclusive of GST) where the fee is greater than 10% of the account balance.

\$ per request (inclusive of GST)

Please select the services being provided in relation to the One-Off fee:

- | | |
|--|---|
| <input type="checkbox"/> Review of your account | <input type="checkbox"/> Contribution strategy |
| <input type="checkbox"/> Strategic superannuation advice | <input type="checkbox"/> Insurance in superannuation strategy |
| <input type="checkbox"/> Investment advice on your account | <input type="checkbox"/> Withdrawal advice |

(2) Member Advice Fee – ongoing

Note: Please note this fee cannot be offered in conjunction with a fixed term arrangement.

The available fee options are:

(2a) Percentage based fee options – flat percentage or tiered percentage

Flat percentage fee

Up to a maximum of 2.2% per annum (inclusive of GST) of your account balance

% per annum (inclusive of GST)

OR

Tiered percentage fee

- Up to a maximum of 2.2% per annum (inclusive of GST) of your account balance can be applied to the amount for each tier.
- The default fee will be 0% if no nomination is made.
- Up to a maximum of 7 tiers.

| | Balance from | Balance to | % per annum (inclusive of GST) |
|--------|-------------------------|-------------------------|-----------------------------------|
| Tier 1 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 2 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 3 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 4 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 5 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 6 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 7 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |

Your adviser has estimated a fee of \$ for the 12 months commencing / /

This fee will be calculated daily using the percentage fee above, your daily account balance and will be charged to your account monthly.

AND/OR

(2b) Flat dollar fee.

Up to a maximum of \$18,000 per annum (inclusive of GST). \$ per annum (inclusive of GST)

This fee will be pro-rated based on the number of days in the month and deducted monthly.

(3) Member Advice Fee – Upfront

Note: Please note this fee cannot be offered in conjunction with a fixed term arrangement.

Up to a maximum of 5.5% (inclusive of GST) of each contribution.

Contributions % (inclusive of GST)
 Transfers/rollovers (not applicable to transfers from existing accounts within IOOF) % (inclusive of GST)

Your adviser has estimated a fee of \$ for the 12 months commencing / /

This fee will be calculated using the percentage fee above, applied against your contribution and/or rollover amount and will be charged to your account as contributions and/or rollovers are received.

(4) Member Advice Fee – Insurance

Up to a maximum of 50% per annum (inclusive of GST) of each insurance premium.

Percentage fee
 Primary: Death or Death and TPD cover % per annum (inclusive of GST)
 Additional: Death or Death and TPD cover % per annum (inclusive of GST)
 Income protection cover % per annum (inclusive of GST)

Your adviser has estimated a fee of \$ for the 12 months commencing / /

This fee will be calculated using the percentage fee above, your insurance premium and will be charged to your account monthly.

OR

Up to a maximum of \$18,000 per annum (inclusive of GST).

Flat fee (dollar amount)

\$ per annum (inclusive of GST)

This fee will be pro-rated based on the number of days in the month and deducted monthly.

(5) Member Advice Fee – fixed term arrangement

Fixed Term Arrangement is for fees that cover a twelve month period or less. The form must be signed within 90 days of the start date. If the supplied start date is in the past, the date will default to the date the application is processed.

Start date / /

End date / /

(5a) Percentage based fee options – flat percentage or tiered percentage

Flat percentage fee

Up to a maximum of 2.2% per annum (inclusive of GST) of your account balance

% per annum (inclusive of GST)

OR

Tiered percentage fee

- Up to a maximum of 2.2% per annum (inclusive of GST) of your account balance can be applied to the amount for each tier.
- The default fee will be 0% if no nomination is made.
- Up to a maximum of 7 tiers.

| | Balance from | Balance to | % per annum (inclusive of GST) |
|---------------|-------------------------|-------------------------|--|
| Tier 1 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 2 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 3 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 4 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 5 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 6 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |
| Tier 7 | \$ <input type="text"/> | \$ <input type="text"/> | <input type="text"/> |

Your adviser has estimated a fee of \$ for the term of the Fixed Term Arrangement.

This fee will be calculated daily using the percentage fee above, your daily account balance and will be charged to your account monthly.

AND/OR

(5b) Flat dollar fee.

Up to a maximum of \$18,000 per annum (inclusive of GST).

\$ per annum (inclusive of GST)

This fee will be pro-rated based on the number of days in the month and deducted monthly.

AND/OR

(5c) Member Advice Fee – Insurance

Up to a maximum of 50% per annum (inclusive of GST) of each insurance premium.

| | | | |
|----------------|--|----------------------|--------------------------------|
| Percentage fee | Primary: Death or Death and TPD cover | <input type="text"/> | % per annum (inclusive of GST) |
| | Additional: Death or Death and TPD cover | <input type="text"/> | % per annum (inclusive of GST) |
| | Income protection cover | <input type="text"/> | % per annum (inclusive of GST) |

Your adviser has estimated a fee of \$ for the term of the Fixed Term Arrangement.

This fee will be calculated using the percentage fee above, your insurance premium and will be charged to your account monthly.

OR

Up to a maximum of \$18,000 per annum (inclusive of GST).

Flat fee (dollar amount) \$ per annum (inclusive of GST)

This fee will be pro-rated based on the number of days in the month and deducted monthly.

Please select the services being provided in relation to the Fixed Term Arrangement:

- | | |
|--|---|
| <input type="checkbox"/> Review of your account | <input type="checkbox"/> Contribution strategy |
| <input type="checkbox"/> Strategic superannuation advice | <input type="checkbox"/> Insurance in superannuation strategy |
| <input type="checkbox"/> Investment advice on your account | <input type="checkbox"/> Withdrawal advice |

Step 12: Insurance cover

The Fund offers Death, Death and TPD and Income Protection insurance. Your family member may apply for insurance cover by completing the 'Application for Insurance' form available in this document, from our website or by contacting ClientFirst.

Step 13: Transfer of existing super

Does your family member have any previous superannuation funds which he/she would like to transfer into the Fund? Yes No

If Yes, your family member must complete a Request to Transfer form available in this document, from our website or by contacting ClientFirst.

Step 14: SuperMatch search and consolidation using IOOF Online

SuperMatch makes consolidating your super easy by using the ATO's automatic electronic search facility.

You can log on to IOOF Online and consolidate your super with a few clicks of a mouse. Using the SuperMatch online functionality you can to conduct a search for your super monies with other superannuation funds including lost member accounts or any ATO-held super (such as super guarantee payments, superannuation holding accounts, Government super contributions or unclaimed superannuation monies.

Step 15: Existing member declaration

- I understand that if any contributions are deposited into my family member's account I have no further right or claim over the benefit arising from these contributions, other than as a possible nominated beneficiary in the event of my family member's death.
- I declare that all the information contained in this form is true and correct.

Member signature

Date / /

Declaration by financial adviser

In submitting this Application:

- I declare that I hold a current AFS Licence **OR** I am a representative or an authorised representative nominated to act on behalf of a holder of a current AFS Licence.
- I declare that the applicant has authorised me, as their agent, to request withdrawals from their account.
- I declare that the financial institution details specified in this form belong to the applicant and I am authorised to instruct the Trustee to pay any withdrawal proceeds to the nominated bank account.
- I release and indemnify the Trustee and any member of the IOOF group from and against all demands, actions, proceedings, losses, liabilities and costs arising directly or indirectly out of or in connection with any withdrawal instructions provided under this authority.
- I confirm that I have provided the applicant with all the necessary information concerning their chosen investment, including the PDS.
- I confirm that fees and commissions have been fully explained to the applicant and that any member advice fees relate to advice about the applicant's superannuation or pension benefits, insurance and investments in the Fund.
- I consent to provide IOOF access to all proof of identification records for the purposes of this Application if requested (pursuant to the AML/CTF Rules Part 7.2).
- I confirm that I have conducted the relevant customer identification procedure in line with the obligations under AML/CTF Law and:

I have attached a certified copy of the applicant's identification document(s) with this Application

Please note: Compulsory where:

- initial contributions equal to or more than \$2 million or
- if the applicant is a Politically Exposed Person or
- the applicant is not residing in Australia

OR

I have completed and signed an FPA/FSC identification form which is attached to this Application (and retained a certified copy of the applicant's identification document(s));

OR

I have sighted and retained a certified copy of the applicant's identification document(s) recorded in the following Record of proof of identity table (**Please complete the following table and declaration**).

| Record of proof of identity (ID) | ID document 1 | ID document 2 |
|----------------------------------|---|---|
| Verified from | <input type="checkbox"/> Original <input type="checkbox"/> Certified copy | <input type="checkbox"/> Original <input type="checkbox"/> Certified copy |
| Document issuer | | |
| Issue date | | |
| Expiry date | | |
| Document number | | |
| Accredited English translation | <input type="checkbox"/> N/A <input type="checkbox"/> Sighted | <input type="checkbox"/> N/A <input type="checkbox"/> Sighted |

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 www.ioof.com.au. It also includes a list of persons authorised to certify copies of original documents.

I declare that I have sighted and retained certified copies of the documents recorded in the Record of proof of identity table.

Signature

Date / /

Name of financial adviser or
AFSL holder representative

Step 17: Proof of identity

If you do not have a financial adviser you need to provide a certified copy of document(s) with this application that clearly shows your full name and either your date of birth or residential address.

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 or a foreign equivalent
- passport (we will accept an Australian passport that has expired within the preceding 2 years)

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 (eg Tax Office Notice of Assessment or rates notice from local council).

Refer to the 'Completing proof of identity' document on www.ioof.com.au for more guidance on acceptable forms of individual identification.

Step 18: Family member declaration and signature

Privacy

Information (including my personal information) provided to the Trustee is used for the purpose of opening a Super account and for other related purposes. For these purposes, the Trustee may disclose my personal information to its related bodies corporate, my employer, my financial adviser, insurers, professional advisers, businesses that have referred me to the Trustee, medical professionals where I have applied for insurance cover, banks and other financial institutions, or to provide me with information about other products or services that may be of interest to me. The Trustee is required to collect my personal information under the *Superannuation Industry (Supervision) Act 1993* and the AML/CTF Law. If I do not provide all of the requested information, the Trustee may not be able to action my request. To verify my identity for Know Your Customer (KYC) purposes, the Trustee may also solicit personal information about me from reliable identity verification service providers. My personal information will be handled in accordance with the Trustee's privacy policy. The privacy policy contains information about how I may access or correct my personal information held by the Trustee and how I may complain about a breach of the Australian Privacy Principles. I may request a copy of the Trustee's privacy policy by contacting the Trustee on 1800 913 118 or at www.ioof.com.au/privacy.

Proof of identity

I have provided the appropriate documents or details of my identity, as outlined in the 'Completing Proof of Identity' document on www.ioof.com.au, that may be required for the purposes of the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Law).

Personal contributions/spouse contributions

If I decide to either make a personal contribution(s) or have a spouse contribution(s) made on my behalf, I meet the necessary conditions as set out in the PDS.

Electronic communications

If I have consented to receive any communications from the Trustee electronically, then I do so on the terms and conditions as set out in the PDS.

Transferring from another product within the Fund

If I am transferring from another product within the Fund, then I do so on the terms and conditions outlined in the PDS.

Financial adviser (if applicable)

- I authorise the Trustee to change the member advice fee(s) selected against my account. These fees are for advice I have or will receive about my superannuation/pension benefits, insurance and investments.
- If I have acquired the services of a financial adviser to obtain advice concerning my investment in IOOF Personal Super then I confirm that I have been fully informed of the nature and risks of the selected investment options and am satisfied these investments are suitable for my investment needs.
- The Trustee will acquire the services of my financial adviser who will act on my behalf in relation to managing my account.
- I hereby authorise my current or any future financial adviser and their staff, to act as my agent to operate my account, to give any instructions on my behalf in relation to my account to the Trustee by any methods as set out in the PDS and to withdraw any funds from my account and authorise payment of the withdrawal benefit to my nominated bank account.
- I release and indemnify the Trustee and any member of the IOOF group from and against all demands, actions, proceedings, claims, losses, liabilities and costs arising directly or indirectly out of or in connection with the Trustee acting or omitting to act on instructions given by my financial adviser and their staff under this authority.
- I authorise the Trustee to continue to follow instructions given under this authority until the Trustee receives notice in writing signed by me to cancel the authority.
- I understand this authority applies to my current or any future financial adviser and their staff, acting as my agent.

Cash Account

If there are insufficient holdings in my Cash Account to meet future expenses, I direct the Trustee to redeem all or part of my investment options in accordance with the Cash Account top-up instruction provided in Step 7.

Deposit Instructions

- The Trustee, IOOF Investment Management Limited (IIML), ABN 53 006 695 021, AFS Licence No. 230524 is directed to process the Deposit Instructions specified on this form.
- The Instructions provided in this form override any previous Instructions.
- I understand this authority applies to my current or any future financial adviser and their staff, acting as my agent.

Restricted investments

- I acknowledge that if I make an investment in an investment option that is designated as a restricted investment (in the investment menu as updated on the IOOF website), I have been informed that:
 - the Trustee is not required to transfer the whole of my withdrawal benefit (or a partial amount requested to be transferred) within 30 days after receiving all information prescribed by Super law (including all information that is necessary to process my request)

- the reasons why an investment is illiquid is due to the underlying fund manager imposing withdrawal restrictions or having the ability to extend the withdrawal period in certain market conditions
- the maximum period in which a transfer must be effected is the period set out in the underlying product disclosure statement for the restricted investment which may be up to 365 days for some restricted investments.
- I understand and accept that a period longer than the 30 days mentioned above is required (possibly in respect of the whole of the requested transfer amount) because of the illiquid nature of the investment.

Product disclosure statements for managed investment options

- I have received (either from the IOOF website or from a financial adviser), read and understood the current product disclosure statement(s) of the underlying managed investments I have selected.
- The Trustee provided me with the product disclosure statement(s) for the underlying managed investments I have selected via the IOOF website and I agree to receive these product disclosure statement(s) by obtaining them from the website.
- I may not have the most current product disclosure statement and continuous disclosure information for a managed investment when switches and/or further investments are made into the Fund.

Investment options

- If I choose not to acquire the services of a financial adviser, I understand the risks and effects of this investment and take full responsibility for my choice of investment options.
- I acknowledge that certain investment options are only available if I am a client of a particular financial adviser or AFS Licensee, and if I cease to be a client of that financial adviser or AFS Licensee, I will not be able to make any new investments into those exclusive investment options (see the notes to the Investment Options Menu in the **IOOF investment guide (IOF.01)** for information on these exclusive investment options).

Maturing investments

If I have invested in maturing investments (term deposits or fixed-term annuities):

- I have read, understood and agree to the terms and conditions regarding investing in maturing investments as set out in the PDS
- the Trustee provided me with the product guide for the underlying maturing investment I have selected via the IOOF website and I agree to receive the product guide by obtaining it from the website
- I have received (either from the IOOF website or from a financial adviser), read and understood the current product guide and any supplementary product guide for the relevant product or service, and the current product guide statements of the underlying maturing investment I have selected.
- I acknowledge, that where this Investment Instruction for a maturing investment is made at the same time as a new application for an IOOF product or service, this Investment Instruction will be processed before any other Investment Instruction relating to my new account is processed.

Listed investments

I hereby authorise that the designated investments be executed on my behalf and acknowledge that this authority is provided on the basis that the Trustee will effect it according to the terms and conditions within the Trust Deed. I also acknowledge these assets will be held in the name of the Fund.

If you do not provide all of the requested information, we may not be able to action your request.

In signing this Application, I declare that:

- I have received, read, signed and understood the PDS for IOOF Personal Super within Australia.
- All details in this Application are true and correct and I undertake to inform the Trustee of any changes to the information supplied as and when they occur.
- I wish to apply for IOOF Personal Super and to become a member of the Fund upon the terms and conditions contained in the Trust Deed dated 20 June 1994 (as amended from time to time) and the PDS.
- I understand that by electing to invest in the Full and Core investment menu, the Core and Full menu fees apply to my account.
- I understand that the insurer will not be able to process my application, administer my insurance or process a claim if my Application for Insurance is not provided.
- I have received and read the PDS, including the section outlining my Duty of Disclosure. I agree to be bound by the provisions of the Trust Deed constituting the IOOF Portfolio Service Superannuation Fund, as amended from time to time, and agree to IOOF Investment Management Limited acting as Trustee under the Trust Deed.
- I consent to the collection, use and disclosure of the above information by the Trustee for the purposes specified in the PDS and privacy policy.
- I confirm that I have read and understood the instructions on how to complete the application form.
- I understand that the fees on my account may change in the following events:
 - my family member's employment status changes
 - I have separated or become divorced from my spouse (only applicable if you are the spouse of the existing member).

Power of Attorney

If your Application is signed under a Power of Attorney, please enclose a certified copy of the Power of Attorney and the proof of identity documents, as outlined in the 'Completing Proof of Identity' document on www.ioof.com.au, for both the Applicant and the Attorney with your Application. If signed under Power of Attorney, the Attorney certifies that no notice of revocation of that Power of Attorney has been received.

Target Market confirmation

I have received personal financial advice in relation to IOOF Personal Super and any investment(s) selected in this form.

OR

I have reviewed and understand the Target Market Determination available at www.ioof.com.au for IOOF Personal Super and any relevant investment(s) selected. I confirm IOOF Personal Super and any investment(s) selected meets my objectives, financial situation and needs.

Please note: if your investment objective(s), timeframe and/or risk profile are inconsistent with those of IOOF Personal Super or the investment(s) selected, we suggest you seek financial advice that takes into account your personal circumstances.

Member/Applicant signature

Member/Applicant
signature

Date / /

Member advice fees (if you completed Step 11)

- I authorise the Trustee to charge the member advice fee(s) selected against my account.
- The amount of any member advice fee(s) that are paid to my financial adviser, or their Australian Financial Services Licensee (Licensee) as agreed by me, will be an additional cost to me and charged against my account. A member advice fee will not be charged unless I tell the Trustee to do so.
- Any agreed member advice fee(s) will be charged to my account and paid in full to the financial adviser, or their Licensee, until I instruct the Trustee to cease payment or when I change my nominated financial adviser
- Where I have chosen Ongoing fees, I understand the consent for IIML to pay the ongoing fees to my adviser will cease on the consent end date, which is 150 days after the next anniversary date for my ongoing fee arrangement.
- I understand my consent for one-off fees will last until the one-off fee is paid.
- I understand my consent for a fixed term arrangement, will last until the end date stated above.
- I understand I can withdraw my consent or vary the ongoing fee arrangement at any time by notice in writing to my adviser, or by contacting ClientFirst.
- I understand I can withdraw my consent at any time before the cost is passed on to me by contacting the Trustee before the fee is paid.

Member/Applicant
signature

Date / /

Please forward all correspondence and enquiries to

Applications and forms

Post IOOF Personal Super, 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