



IOOF PURSUIT SELECT – FORM D

30 November 2019

Family Fee Aggregation Application

Complete the following form to apply for Family Fee Aggregation across IOOF Pursuit Select products.¹

Terms and conditions

- Each person applying to link for the purpose of Family Fee Aggregation must be a member of the same immediate family (husband, wife, partner, son, daughter, father, mother, brother, sister, grandparent or grandchild) and in-laws of the immediate family. It also includes 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.
- Each linked account will be able to view information via Portfolio Online about the other accounts in the Family Fee Aggregation group, including names, account numbers, commencement dates and annual administration fee discounts for the year.

Any account(s) in the IOOF Pursuit Select Investment Service held in the name of a trust or company can be linked for the purposes of Family Fee Aggregation, provided that either a director or trustee has a linked account in their own name or the director or trustee is an immediate family member with another linked account.

The Trustee/Service Operator collects the information in this form for the purpose of processing the application. Any personal information provided in this form will be handled in accordance with the Trustee/Service Operator's privacy policy, available at www.ioof.com.au/privacy.

Please ensure that each linked account holder (including yourself) completes and signs this form, and that each account holder 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 account 1

Title (Dr/Mr/Mrs/Ms/Miss)	<input type="text"/>	Surname	<input type="text"/>
Given name(s)	<input type="text"/>		
Account number (if known)	<input type="text"/>	-	<input type="text"/>
Date of birth	<input type="text"/>	/	<input type="text"/>
Relationship to group (such as husband, wife)	<input type="text"/>		

Declaration: I have read the current PDS and/or Offer Document, 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

¹ IOOF Pursuit Select products include: IOOF Pursuit Select Personal Superannuation, IOOF Pursuit Select Allocated Pension, IOOF Pursuit Select Term Allocated Pension and the IOOF Pursuit Select Investment Service.

Linked account 2

Title (Dr/Mr/Mrs/Ms/Miss)	<input type="text"/>	Surname	<input type="text"/>
Given name(s)	<input type="text"/>		
Account number (if known)	<input type="text"/> - <input type="text"/> - <input type="text"/>		
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Relationship to group (such as husband, wife)	<input type="text"/>		

Declaration: I have read the current PDS and/or Offer Document, 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	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
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Linked account 3

Title (Dr/Mr/Mrs/Ms/Miss)	<input type="text"/>	Surname	<input type="text"/>
Given name(s)	<input type="text"/>		
Account number (if known)	<input type="text"/> - <input type="text"/> - <input type="text"/>		
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Relationship to group (such as husband, wife)	<input type="text"/>		

Declaration: I have read the current PDS and/or Offer Document, 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	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
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Linked account 4

Title (Dr/Mr/Mrs/Ms/Miss)	<input type="text"/>	Surname	<input type="text"/>
Given name(s)	<input type="text"/>		
Account number (if known)	<input type="text"/> - <input type="text"/> - <input type="text"/>		
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Relationship to group (such as husband, wife)	<input type="text"/>		

Declaration: I have read the current PDS and/or Offer Document, 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	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
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