### 100F **PURSUIT**

# SFI FCT FOR INFOCUS

30 November 2019

# FORM D - Family Fee Aggregation Application

Complete the following form to apply for Family Fee Aggregation across IOOF Pursuit Select for Infocus products.<sup>1</sup>

#### 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 for Infocus 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's/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)							Su	rnan	ne L												$\perp$	$\perp$	$\perp$		
Given name(s)																									
Account number (if known)								- [			_														
Date of birth			/			/ [																			
Relationship to group (such as husband, wife)																									
<b>Declaration:</b> 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																Dat	e [		] /		/	′			

<sup>1</sup> IOOF Pursuit Select for Infocus products include: IOOF Pursuit Select Personal Superannuation for Infocus, IOOF Pursuit Select Allocated Pension for Infocus, and the IOOF Pursuit Select Investment Service for Infocus.

Linked account 2																								
Title (Dr/Mr/Mrs/Ms/Miss)	Surname																							
Given name(s)																								
Account number (if known)			1			1		_			_													
Date of birth Relationship to group (such as husband, wife)			/			/																		
<b>Declaration:</b> 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	Signature												Date		/			/						
Linked account 3																								
Title (Dr/Mr/Mrs/Ms/Miss)							Sı	urnai	me															
Given name(s)																								
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<b>Declaration:</b> 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		/			/			
Linked account 4																								
Title (Dr/Mr/Mrs/Ms/Miss)							Sı	urnar	me															
Given name(s)																								
Account number (if known)			1			1		_			_													
Date of birth Relationship to group (such as husband, wife)			/			/																		
<b>Declaration:</b> I have read the account(s) to be linked to oth information I have disclosed	ner p	artie	es de	etaile	ed or	n thi	s for	m fo										_	_	_		-	-	

Signature

## Linked account 5 (Dr/Mr/Mrs/Ms/Miss) Surname Given name(s) Account number (if known) Date of birth Relationship to group (such as husband, wife) **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 Linked account 6 Title (Dr/Mr/Mrs/Ms/Miss) Surname Given name(s) Account number (if known) Date of birth Relationship to group (such as husband, wife) 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

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.

Date / / / /

Please sign and return this form to:

Signature

Post IOOF Pursuit, Reply Paid 264, Melbourne, VIC 8060

**Email** PursuitApplications@ioof.com.au

**Telephone** 1800 913 118 **Facsimile** 03 8614 4431