

Adviser Service Fee

Consent for Fixed Term Adviser Service Fee Deduction

By completing this form, you are providing consent to pay adviser service fees to your nominated financial adviser from your account with Lifeplan Australia Friendly Society Limited (LAFS). Please read the form carefully to ensure this accurately reflects the agreement with your adviser. If you have any questions, please feel free to speak with your adviser on (*Adviser's contact phone number*)

Member/Joint Member details

Title	Mr	Mrs	Ms	Others: <i>Please specify</i>
Date of birth (dd/mm/yyyy)				
Last name				
Given name(s)				
Middle name				
Home or Work phone			Mobile phone	
Email address				
Home address				

Title	Mr	Mrs	Ms	Others: <i>Please specify</i>
Date of birth (dd/mm/yyyy)				
Last name				
Given name(s)				
Middle name				
Home or Work phone			Mobile phone	
Email address				
Home address				

Financial adviser details

Adviser full name			
AFSL			
Dealer group			
Work phone		Mobile phone	
Email address			
Complete office address			

Nominated product/account

You agree that the Fixed Term Adviser Service Fee will be deducted from the account(s) noted below:

Product Name / Account #	Account Owner(s)

Fixed term adviser service fee amount

You agree that the following fee will be deducted from your nominated account(s) and be paid as adviser service fees for a maximum of 12 months:

Dollar (\$)/month	OR	Percentage (%)/per annum

Reasonable estimate / %FUA

We estimate you will pay the following ongoing fee(s) from the account noted below:

Product Name / Account #	Account Owner(s)	Current Investment Balance	Agreed Percentage Fee	Estimated Fee (inc GST) / Month
		\$	%	\$
		\$	%	\$
Total estimate of fees for the next 12 months				\$

Please be aware this is an estimate of fees only based on your current investment balance(s) and an agreed percentage fee as noted in the table to be applied at the time the deduction is processed.

Services provided for fees

Below is an outline of the services your adviser will provide under this fee agreement.

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Consent period – start and end dates

This consent starts on _____ and ends on _____
DD / MM / YYYY DD / MM / YYYY

The consent end date for this current arrangement cannot be changed. The maximum period the consent can be valid for is 12 months from the fee start date.

Client Signature(s)

By signing below, you give consent to both of:

- (i) the deduction of fixed term fees, as outlined in this notice; and
- (ii) the method of payment of those fixed term fees.

Name	
Signature	Date

Name	
Signature	Date