

Australian Expatriate Superannuation Fund

Personal Individual Representative Appointment Form

The Trustee

will only accept this form if it is correctly and fully completed.

Authority to Release Information

When to use this form

This form should be completed if you wish to allow a Personal Individual Representative to receive information on your Australian Expatriate Superannuation Fund Account.

A Personal Individual Representative can be an individual such as a spouse, partner, family member, family friend, power of attorney.

If you wish to appoint a Financial Adviser who will have authority, or authority to provide instructions, please complete the Adviser Appointment / Remuneration Form on our website www.ivcm.com

If you wish to appoint a Financial company that is not a Financial Adviser such as a Tax Adviser, Solicitor, Please complete the Non-Financial Adviser Business Representative Appointment Form on our website www.ivcm.com

1. Member details

Member number/s

Full name

Date of birth [dd/mm/yy]

Email address

Contact Number

Postal Address

Residential Address

☐

As Above

Issued by the Trustee
Diversa Trustees Limited
ABN 49 006 421 638
AFSL 235153
RSE Licence L0000635

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2. Personal Individual Representative

I confirm that I wish for the Personal Individual Representative below in section 2 to receive information on my Australian Expatriate Superannuation Fund Account.

The Personal Individual Representative authority shall remain in force until you as the member notify Australian Expatriate Superannuation Fund otherwise in writing.

Title	<input type="text"/>
Personal Individual Representative Name	<input type="text"/>
Relationship	
Spouse / Partner	<input type="checkbox"/>
Family Member	<input type="checkbox"/>
Power of Attorney	<input type="checkbox"/>
Friend	<input type="checkbox"/>
Other	<input type="text"/>

Note: Where your Personal Individual Representative is a Power of Attorney, please provide the supporting legal document, either original or certified copy (i.e. Lasting Power of Attorney).

Date of Birth [dd/mm/yyyy]	<input type="text"/>
Email Address	<input type="text"/>
Postal address	<input type="text"/>
	<input type="text"/>

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When complete

email or post this form:

australia@ivcm.com

IVCM (Aust) Pty Ltd

201 Sussex Street, Tower 2,
Level 20, Darling Park,
Sydney, NSW 2000

Note: The personal information provided on this form is collected and held for the Australian Expatriate Superannuation Fund, in accordance with the Australian Privacy Principles of the Privacy Act 1988, for the purpose of administering accounts and providing services associated with fund membership.

Any questions and for further information about how personal information is handled, please call us on Member Services 1300 323 489 or visit our Private Policy on our website at www.ivcm.com/privacy-policy/

3. Declaration

- I agree for the Australian Expatriate Superannuation Fund to release information to my appointed Personal Individual Representative as laid out in section 2 of the Personal Individual Representative Appointment Form.
- Where a current appointed Personal Individual Representative exists on your account the Personal Individual Representative laid out in section 2 shall be replaced by the new Personal Individual Representative in this form.
- I understand that to remove the appointed Personal Individual Representative laid out in this form, I shall confirm my request in writing to the Australian Expatriate Superannuation Fund.
- I understand that the appointed Personal Individual Representative has information only and can not instruct the Australian Expatriate Superannuation Fund on my account.
- I fully understand that I as the member am fully responsible for any instructions and shall notify the Australian Expatriate Superannuation Fund accordingly through the appropriate form or process laid out in the product disclosure statement or where I am unsure by contacting the Australian Expatriate Superannuation Fund directly.

Signature of Member

Date [dd/mm/yyyy]

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