

# Request to pay advice fee

Please phone us on **1800 023 928** with any questions about this form or visit our website **oursuperfund.com.au** for more information.

## Use of this form

You can use this form to request a one-off payment from your Accumulate Plus or Retirement Access account balance to your financial adviser for financial advice services provided in relation to that account. If financial advice is provided in respect of more than one account, a separate *Request to pay advice fee* form must be completed for each account. Note: If an advice fee is paid from your account it may appear in the transaction listing section of your benefit statement as an 'adviser service fee'.

## Terms and conditions for payment of advice fee

It is important that both you and your adviser understand the following terms and conditions that apply to payment of an advice fee from your Accumulate Plus or Retirement Access account. By signing in sections 1C and 2C, you and your adviser agree to these terms and conditions.

1. The trustee and your financial adviser (as named in section 2A) agree that, subject to the remaining terms and conditions in this form, if you request your financial adviser to provide you with advice for the advice fee set out in section 1B:
  - your financial adviser will provide that advice in return for payment of the advice fee by the trustee
  - the trustee will pay the advice fee to your financial adviser and deduct that amount from your Accumulate Plus or Retirement Access account indicated in section 1A.
2. The financial advice services related to the advice fee will be agreed between you and your financial adviser and must relate solely to your interest in the Accumulate Plus or Retirement Access account indicated in section 1A.
3. The trustee will deduct the advice fee from your investment option(s) as instructed by you in section 1B.
4. Where your financial adviser is part of an adviser dealer group, payment will be made to that dealer group not the individual adviser.
5. Unless otherwise agreed by the trustee, the advice fee:
  - cannot exceed \$5,000 (including GST)
  - is limited to one payment from your account in a 12-month period (as determined by the trustee)
  - cannot reduce your account balance below \$1,500 (for Accumulate Plus accounts) or below an amount required to satisfy your minimum annual pension payment requirement (for Retirement Access accounts).
6. Advice fee payments are processed effective the first business day on or after the 5th day of each month.

## SECTION 1. TO BE COMPLETED BY THE MEMBER

### 1A: Member account details

Please indicate the Accumulate Plus or Retirement Access account number to which the advice applies and from which the fee will be paid:

Accumulate Plus account number

or

Retirement Access account number

Title  Mr  Mrs  Miss  Ms Other

Full given name(s)

Surname

Postal address

Unit number  Street number  PO Box  Street name

Suburb  State  Post code

Daytime phone number

Date of birth

Email address

By providing your email address, you agree that we may use this address to provide you with information about your investment (such as transaction confirmations, statements, reports and other material). From time to time we may still need to send you letters in the post.

**1B: Details of advice fee to be paid**

You are limited to payment of one advice fee from your account in a 12-month period (as determined by the trustee) and the maximum payment amount for any fee is \$5,000 (including GST). The payment of any advice fee cannot reduce your account balance below \$1,500 (for Accumulate Plus accounts) or below an amount required to satisfy your minimum annual pension payment (for Retirement Access accounts).

Indicate the amount of the advice fee to be paid from your account (amount shown should include GST)

\$

**Note:** We will pay your adviser (or their dealer group if applicable) the full amount of the advice fee indicated above. However, the actual amount we deduct from your account may be less than the amount indicated, as any tax benefit that the fund is entitled to may be passed on to you in the form of reduced fees. Refer to the Reference Guide: Fees and costs (available from our website or by contacting us) for more information.

Choose **ONE** of the following options for the way in which the fee is to be deducted from your account balance:

I would like the fee deducted proportionally as per my current investment selection

I would like the fee deducted from my investment option(s) as shown below:

Investment options	Amount
<b>Diversified options</b>	
Conservative (formerly Mix 30)	\$ <input type="text"/>
Moderate (formerly Mix 50)	\$ <input type="text"/>
Balanced–MySuper (formerly Mix 70)	\$ <input type="text"/>
Growth (formerly Mix 90)	\$ <input type="text"/>
<b>Single asset class options</b>	
Cash	\$ <input type="text"/>
Fixed Interest	\$ <input type="text"/>
Australian Shares	\$ <input type="text"/>
International Shares	\$ <input type="text"/>
<b>TOTAL</b>	<b>\$ <input type="text"/></b>

**1C: Member declaration and signature**

By signing below, I declare to the trustee of Commonwealth Bank Group Super and my financial adviser named in section 2A that:

- I consent to the trustee paying to my financial adviser (or their dealer group if applicable) the amount specified in section 1B and deducting that amount from my account in accordance with the terms and conditions set out on page 1 of this form.
- I acknowledge that my financial adviser and I have agreed the financial advice services to be performed by my financial adviser in relation to this advice fee arrangement.
- I confirm that the amount to be deducted from my Accumulate Plus or Retirement Access account and paid to my financial adviser relates solely to financial advice in relation to my interest in the account indicated in section 1A and is a reasonable amount for the financial advice provided.
- I confirm that I have chosen my financial adviser and that the trustee is not responsible for the financial advice services to be provided by my selected financial adviser.
- I release the trustee from any claim relating to the financial advice services to be provided by my selected financial adviser, other than a claim for the trustee to pay the agreed fee and to deduct it from my account.

Signature

Print name

Date



**Your financial adviser will also need to complete section 2 over the page.**

**SECTION 2. TO BE COMPLETED BY THE FINANCIAL ADVISER****2A: Adviser details**

Given name(s)		Surname	
<input type="text"/>		<input type="text"/>	
Postal address			
Unit number	Street number	PO Box	Street name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb		State	Post code
<input type="text"/>		<input type="text"/>	<input type="text"/>
Daytime phone number		Email address	
<input type="text"/>		<input type="text"/>	
Dealer group name (if applicable)		Dealer group code	Financial adviser stamp
<input type="text"/>		<input type="text"/>	
AFSL number	Adviser code*	*If you are a Commonwealth Financial Planning adviser, please provide your ComInsure adviser number here.	
<input type="text"/>	<input type="text"/>		

**2B: Payment details**

If you are part of a dealer group, payment details for the dealer group are to be provided below. Confirmation of this payment will be provided as outlined below and will be the only reporting provided in respect of this payment. This payment will not appear on any other reporting you may receive from our administrator, Colonial First State Investments Limited, in relation to other products.

Please provide the following details for the bank account to which this advice fee is to be credited:


Name of Australian financial institution	Name of account holder	
<input type="text"/>	<input type="text"/>	
Branch name	Branch number (BSB)	Account number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please provide an email address to receive confirmation of payment advice—if no email is provided, confirmation will be mailed to the postal address provided in section 2A.

**2C: Financial adviser declaration and signature**

By signing below, I declare to the trustee of Commonwealth Bank Group Super and the member named in section 1A that:

- I agree to the terms and conditions set out on page 1 of this form.
- I confirm that the financial advice services provided are not provided to myself, to a member of my family or to another adviser from the same advice practice or dealer group.
- I confirm that the financial advice services that I will provide to the member are solely in relation to the member's Accumulate Plus or Retirement Access account indicated in section 1A.
- I am authorised to provide, and will in fact provide, financial advice services in relation to the member's account under an appropriate Australian Financial Services Licence.
- I will not represent to the member that I am acting on behalf of the trustee.
- If I am a member of a dealer group, I am authorised by the dealer group to create, on its behalf, a fee entitlement (for the dealer group) on the terms set out in this form.

Signature	<input type="text"/>	Print name	<input type="text"/>
		Date	<input type="text"/>

**!** Please ensure that both you and your financial adviser have signed in sections 1C and 2C respectively—this request cannot proceed if both sections are not signed.

Interests offered by Commonwealth Bank Group Super ('the fund') (ABN 24 248 426 878) are issued by Commonwealth Bank Officers Superannuation Corporation Pty Limited ('the trustee') (ABN 76 074 519 798, AFSL 246418).

**Please send the completed form to:**

Mail: Commonwealth Bank Group Super, GPO Box 4758, Sydney NSW 2001

Fax: (02) 9303 7700 Scan & email: oursuperfund@cba.com.au

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