

Australian Expatriate Superannuation Fund

Authorised Representative Appointment

Form **14**

The Trustee

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

Any questions, call
Member Services 1300 323 489

You can use this form to appoint an Authorised Representative to access information or switch investment options on your super account. Your Authorised Representative is not permitted to perform any other actions in respect of your super account.

Issued by the Trustee
Tidswell Financial Services Ltd
ABN 55 010 810 607
AFSL 237628
RSE Licence L0000888

1. Member details

Member number/s	<input type="text"/>
Full name	<input type="text"/>
Date of birth [dd/mm/yy]	<input type="text"/>
Email address	<input type="text"/>

2. Details of your Authorised Representative

Full Name	<input type="text"/>		
Street address	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Unit number	Street number	Street name
[Your street address cannot be a post office box]	<input type="text"/>		<input type="text"/>
	Suburb		State
	<input type="text"/>		Postcode
	<input type="text"/>		
	Country		
Postal address	<input type="text"/>		
[If different to your street address]	Post Office Box number		
	<input type="text"/>		<input type="text"/>
	Suburb		State
	<input type="text"/>		Postcode
	<input type="text"/>		
	Country		
Email address	<input type="text"/>		
Mobile number	<input type="text"/>		
Work number	<input type="text"/>		

When complete
email or post this form:

australia@ivcm.com

IVCM (Aust) Pty Ltd

PO Box 7403
Baulkham Hills
NSW, 2153

3. Level of Authority

What level of authority will this person have on your account?

- My authorised representative is able to make enquiries only on my super account.
- My authorised representative is able to make enquiries and switch investment options on my super account until I give written notice to the Trustee to terminate the authority.

Note: We may seek further verification from you or your authorised representative before acting on instructions from them.

4. Declaration

Signature of Member

Date
[dd/mm/yy]

Signature of Authorised Representative

Date
[dd/mm/yy]