

Change Adviser Details Form

For the Russell Private Active Pension



Use this form to advise any changes to your adviser details. Please complete the relevant sections in BLOCK LETTERS.

We will send information relating to your account balance to your adviser. Please note that an adviser service fee will not be paid unless authorised on this form or the original *Application Form*.

Copies of transaction confirmations, member statements and other communications will be sent to advisers, generally by email.

We will generally accept instructions from your adviser when we receive a Power of Attorney that allows your adviser to act on your behalf. You must notify us if the Power of Attorney becomes void or redundant, or if you decide to change advisers.

Your completed form should be sent to the following address: Russell Private Active Pension Locked Bag A4094 Sydney South NSW 1235 Fax: (02) 9372 6288	You can also contact us as follows: Helpline Toll free on 1800 300 353 Operating hours are from Monday to Friday, 9am – 5pm (Sydney time). Adviser line Toll free on 1800 458 272	Website www.russell.com.au/retirement Email russellpension@russellsuper.com
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1. Adviser contact details

Mark box if there is NO change to your adviser’s contact details.

If your adviser’s details have changed or you are changing adviser, you should ask the adviser to complete their details (including their email address and fax number), sign and stamp this form.

a. Dealer group name AFS licence number

b. Company name

c. Adviser name

d. Adviser/Company address

e. Adviser email for confirmation (if required)

f. Telephone g. Fax

h. Please mark one option only and complete the relevant details:

Option 1 - Authorised representatives of licensed dealer groups

I declare that I am authorised to sign on behalf of the licensed dealer group. On behalf of the dealer group I acknowledge and agree that the Trustee may cease or vary the adviser service fee if so notified by the applicant. The dealer group and I are neither the agents nor partners of the Trustee or a company in the Russell Investment Group.

SIGNATURE OF THE ADVISER

OR

1. Adviser contact details (continued)

Option 2 - Licensed financial advisers



I declare that I am a licensed financial adviser and do not represent a dealer group and acknowledge and agree that the Trustee may cease or vary the adviser service fee if so notified by the applicant. I am not an agent nor a partner of the Trustee or a company in the Russell Investment Group.

SIGNATURE OF THE ADVISER

i. **Please mark this box to remove the current adviser on file.**

You should speak to your adviser about this decision.

j. Adviser stamp

Adviser stamp

2. Adviser service fee

a. ONGOING ADVISER SERVICE FEE

Your adviser is required to sign this section unless the adviser service fee is being reduced to zero.

If you and your client have agreed an ongoing adviser service fee, please select one of the following percentages of the value of the investment (including GST) or nominate a fixed dollar amount per annum (including GST) which is to be paid monthly from your client's account on approximately the last business day of the month. We will redeem units to this amount from your client's account and pay you/your dealer group accordingly. The payment will be made to the dealer group which will then pay you (the adviser), as per the instructions below. The ongoing adviser service fee will continue to be deducted from your client's account until they notify us of the contrary in writing.

Percentage (including GST)



0.00% p.a. 0.275% p.a. 0.55% p.a. 0.775% p.a. 1.00% p.a. 1.10% p.a.
 Other (up to 1.10% p.a.) > . %

OR

Fixed annual dollar amount (including GST)



\$.00

The initial adviser service fee can be zero.

Mark this box if you want us to index the fixed dollar amount by Average Weekly Ordinary Time Earnings (AWOTE) each 1 July. Percentage fees cannot be indexed.

b. ONGOING ADVISER SERVICE FEE SPLIT BETWEEN DEALER GROUP AND ADVISER*

Please specify how you would like the ongoing adviser service fee to be split between the dealer group and adviser, ensuring that the two percentages or two fixed dollar amounts add up to the amount you have written above:



Dealer group . % p.a. OR \$.00

AND

Adviser . % p.a. OR \$.00

* Where an adviser is a representative of a dealer group whose details appear on this Application Form, you are required to advise us of the payment split between the dealer group and adviser. This is a new requirement under the Future of Financial Advice legislation.

2. Adviser service fee (continued)

c. PLEASE MARK ONE OPTION ONLY AND COMPLETE THE RELEVANT DETAILS:

Option 1 - Authorised representatives of licensed dealer groups

➤ I declare that I am authorised to sign on behalf of the licensed dealer group. On behalf of the dealer group I acknowledge and agree that the Trustee may cease or vary the advisory service fee if so notified by the applicant. The dealer group and I are neither the agents nor partners of the Trustee or a company in the Russell Investment Group.

SIGNATURE OF THE ADVISER

[Signature box]

OR

Option 2 - Licensed financial advisers

➤ I declare that I am a licensed financial adviser and do not represent a dealer group, and I acknowledge and agree that the Trustee may cease or vary the adviser service fee if so notified by the applicant. I am not an agent nor a partner of the Trustee or a company in the Russell Investment Group.

SIGNATURE OF THE ADVISER

[Signature box]

d. ADDITIONAL INSTRUCTIONS

Mark this box if you want us to index the fixed dollar amount by Average Weekly Ordinary Earnings (AWOTE) each 1 July. Percentage fees cannot be indexed.

e. ADVISER STAMP

Adviser stamp

3. Authorisation

If you have a financial adviser it is important that you consult them prior to effecting changes to your account. If you have consulted your adviser regarding this change or you would like to proceed with this request without speaking with your adviser please sign, date and return this form to us.

I request that the Trustee redeem units from my account each month to pay my nominated financial adviser the ongoing adviser service fee I have selected on this form and direct the Trustee to pay the proceeds of this redemption from my Cash Holding Account to my nominated financial adviser.

If signed under Power of Attorney, the attorney verifies that no notice of revocation of power has been received.

Investor signature

[Signature box]

Date of birth (dd/mm/yyyy)

[Date of birth input boxes]

Investor name (print)

[Investor name input boxes]

Investor number

[Investor number input boxes]

Date (dd/mm/yyyy)

[Date input boxes]