

Risk Only Fact Find

Client Name: _____

Adviser Name: _____

Date Completed: _____

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Privacy Statement

Private and Confidential

Important Notice

Before we are able to provide any financial or credit service, your adviser must collect and hold personal information relevant to your personal and financial situation, your personal and financial needs and objectives, and the service to be provided. The information requested in this Fact Find will be used for this purpose.

This Fact Find will ideally be completed by you prior to our meeting. This will help us to understand your overall position and goals, and to focus on the things that are important to you during our meeting.

Failure to provide accurate, complete and up-to-date information may result in your adviser giving advice or providing a service that may be inappropriate and/or not in your best interest. As a consequence you may lose the right to seek compensation from your adviser and/or Infocus for any loss you may suffer.

To provide the best possible service to you we will, from time to time use personal information provided by you to inform you of products and services which may be of interest to you unless you tell us not to.

Your Privacy

Your adviser and Infocus are committed to maintaining the privacy of your personal information at all times. We collect and hold personal information for the purpose of providing the services you have requested from us and to allow us to meet our obligations under the law. Your adviser, Infocus and our associated entities adhere to the Australian Privacy Principles.

Our privacy policy sets out a range of information that allows you to understand the kinds of information we collect and hold; how that information is collected and held and the purpose for which we collect, hold, use and disclose that information including if that disclosure is made in a foreign country. The policy also sets out how you can access and correct the information we hold. It also includes information on how to make a complaint if things go wrong and how we will address your issues.

Our standard practice is to deliver a copy of our current privacy policy in every case before we provide a service and when this is updated. It is also available here <http://www.infocus.com.au/privacy-policy> Feel free to contact your adviser or our Privacy Officer if you have any questions.

Privacy Officer

Post PO Box 1856 Sunshine Plaza 4558

Phone **07 5458 9400**

Email **ProfessionalStandards@Infocus.com.au**

Personal Details

Client One

Client Two

Title

Surname

Given Name(s)

Preferred Name

Maiden Name

Date of Birth

Town & Country of Birth

Marital Status

Anniversary Date

Residency Status
 Permanent Resident
 Foreign Resident
 Employment Passport

Permanent Resident
 Foreign Resident
 Employment Passport

Tax Residency Status
 Resident Non Resident

Resident Non Resident

Visa Status
 Not Applicable
 Temporary Visa
 Permanent Visa

Not Applicable
 Temporary Visa
 Permanent Visa

Do you have Private Health Cover?
 Yes No

Yes No

Provider Name

Member Number

Type of Health Cover
 None Full Hospital
 Partial Hospital Extras
 Hospital Plus Extras

None Full Hospital
 Partial Hospital Extras
 Hospital Plus Extras

How is your Health?
 Excellent Good Fair Poor

Excellent Good Fair Poor

Are you a Smoker or have you smoked in the last 12 months?
 Yes No

Yes No

Do you both agree to grant each other access to your information?
 Yes No

Yes No

Client Referred By

Financial Dependants

Name	Date of Birth	Client Relationship	Partner Relationship	Dependant Until <i>(date)</i>
<input type="text"/>	<input type="text" value="/ /"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="/ /"/>
<input type="text"/>	<input type="text" value="/ /"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="/ /"/>
<input type="text"/>	<input type="text" value="/ /"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="/ /"/>

Contact Details

	Client One	Client Two
Residential Address	<input type="radio"/>	<input type="radio"/>
No & Street	<input type="text"/>	<input type="text"/>
Suburb	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Postal Address	<input type="radio"/>	<input type="radio"/>
No & Street or PO Box	<input type="text"/>	<input type="text"/>
Suburb	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Work Address	<input type="radio"/>	<input type="radio"/>
No & Street or PO Box	<input type="text"/>	<input type="text"/>
Suburb	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Email		
Home Email	<input type="text"/>	<input type="text"/>
Work Email	<input type="text"/>	<input type="text"/>
Phone Contact		
Home Phone	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>
Work Phone	<input type="text"/>	<input type="text"/>
Work Fax	<input type="text"/>	<input type="text"/>

Nominate preferred contact information by ticking the appropriate circles.

Employment

	Client One	Client Two
Status	<input type="radio"/> Unemployed <input type="radio"/> Part Time / Casual <input type="radio"/> Full Time <input type="radio"/> Self Employed <input type="radio"/> Retired <input type="radio"/> Student <input type="radio"/> Contractor <input type="radio"/> Permanent Part Time	<input type="radio"/> Unemployed <input type="radio"/> Part Time / Casual <input type="radio"/> Full Time <input type="radio"/> Self Employed <input type="radio"/> Retired <input type="radio"/> Student <input type="radio"/> Contractor <input type="radio"/> Permanent Part Time
Employer Name	<input type="text"/>	<input type="text"/>
Occupation	<input type="text"/>	<input type="text"/>
Industry	<input type="text"/>	<input type="text"/>
Hours per Week	<input type="text"/>	<input type="text"/>
Employee Start Date	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Employee End Date	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Accumulated Annual Leave	<input type="text"/> Days	<input type="text"/> Days
Accumulated Long Service Leave	<input type="text"/> Days	<input type="text"/> Days
Accumulated Personal/Sick Leave	<input type="text"/> Days	<input type="text"/> Days

Goals & Objectives

Please list your reasons for seeking financial advice below and number the priority of your goals from number 1 being the most important to you.

-
-
-
-

Assets

Do You Own:

Bank Accounts: Yes (Provide Details) No See Attached

Owner	<input type="text"/>	Current Value	<input type="text" value="\$"/>
Vendor / Product	<input type="text"/>	Account Number	<input type="text"/>
Interest Rate	<input style="text-align: right; width: 50px;" type="text" value="%"/>		

Cash Management Trusts: Yes (Provide Details) No See Attached

Owner	<input type="text"/>	Current Value	<input type="text" value="\$"/>
Vendor / Product	<input type="text"/>	Account Number	<input type="text"/>
Interest Rate	<input style="text-align: right; width: 50px;" type="text" value="%"/>		

Term Deposits: Yes (Provide Details) No See Attached

Owner	<input type="text"/>	Current Value	<input type="text" value="\$"/>
Vendor / Product	<input type="text"/>	Account Number	<input type="text"/>
Interest Rate	<input style="text-align: right; width: 50px;" type="text" value="%"/>	Maturity Date	<input type="text"/>

Properties: Yes (Provide Details) No See Attached

Owner	<input type="text"/>	Address	<input type="text"/>
Property Type	<input type="radio"/> Residential <input type="radio"/> Business <input type="radio"/> Investment	Current Value	<input type="text" value="\$"/>
Purchased	<input type="text" value="/ /"/>		
Owner	<input type="text"/>	Address	<input type="text"/>
Property Type	<input type="radio"/> Residential <input type="radio"/> Business <input type="radio"/> Investment	Current Value	<input type="text" value="\$"/>
Purchased	<input type="text" value="/ /"/>		

Home Contents: Yes (Provide Details) No See Attached

Owner	<input type="text"/>	Current Value	<input type="text" value="\$"/>
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Superannuation

Yes (Provide Details)

No

See Attached

Owner	<input type="text"/>	Current Value	\$ <input type="text"/>
Provider	<input type="text"/>		
Owner	<input type="text"/>	Current Value	\$ <input type="text"/>
Provider	<input type="text"/>		
Owner	<input type="text"/>	Current Value	\$ <input type="text"/>
Provider	<input type="text"/>		
Owner	<input type="text"/>	Current Value	\$ <input type="text"/>
Provider	<input type="text"/>		

Liabilities

Do You Have A:

Loan (Secured by Property): Yes (Provide Details) No See Attached

Security	<input type="text"/>	Vendor Product	<input type="text"/>
Account Number	<input type="text"/>	Balance	<input type="text"/>
Interest Rate	<input type="text"/> %	Minimum Repayment	<input type="text"/>
Actual Repayment	<input type="text"/> \$	Credit Limit	<input type="text"/> \$
Interest Type	<input type="radio"/> Fixed <input type="radio"/> Variable	Purpose	<input type="radio"/> Personal <input type="radio"/> Investment
Loan Type	<input type="radio"/> Standard <input type="radio"/> Line of Credit <input type="radio"/> Offset <input type="radio"/> Other		

Security	<input type="text"/>	Vendor Product	<input type="text"/>
Account Number	<input type="text"/>	Balance	<input type="text"/>
Interest Rate	<input type="text"/> %	Minimum Repayment	<input type="text"/>
Actual Repayment	<input type="text"/> \$	Credit Limit	<input type="text"/> \$
Interest Type	<input type="radio"/> Fixed <input type="radio"/> Variable	Purpose	<input type="radio"/> Personal <input type="radio"/> Investment
Loan Type	<input type="radio"/> Standard <input type="radio"/> Line of Credit <input type="radio"/> Offset <input type="radio"/> Other		

Business Loan: Yes (Provide Details) No See Attached

Security	<input type="text"/>	Vendor Product	<input type="text"/>
Account Number	<input type="text"/>	Balance	<input type="text"/>
Interest Rate	<input type="text"/> %	Minimum Repayment	<input type="text"/>
Actual Repayment	<input type="text"/> \$	Credit Limit	<input type="text"/> \$
Interest Type	<input type="radio"/> Fixed <input type="radio"/> Variable	Purpose	<input type="radio"/> Personal <input type="radio"/> Investment
Loan Type	<input type="radio"/> Standard <input type="radio"/> Line of Credit <input type="radio"/> Offset <input type="radio"/> Other		

Credit Card: Yes (Provide Details) No See Attached

Owner	<input type="text"/>	Vendor Product	<input type="text"/>
Account Number	<input type="text"/>	Balance	<input type="text"/>
Interest Rate	<input type="text"/> %	Minimum Repayment	<input type="text"/>
Actual Repayment	<input type="text"/> \$	Credit Limit	<input type="text"/> \$

Personal Loan: Yes (Provide Details) No See Attached

Owner	<input type="text"/>	Vendor / Product	<input type="text"/>
Account Number	<input type="text"/>	Balance	<input type="text" value="\$"/>
Interest Rate	<input style="text-align: right; width: 50px;" type="text" value="%"/>	Minimum Repayment	<input type="text" value="\$"/>
Actual Repayment	<input type="text" value="\$"/>	Credit Limit	<input type="text" value="\$"/>

Margin Loan: Yes (Provide Details) No See Attached

Owner	<input type="text"/>	Vendor / Product	<input type="text"/>
Account Number	<input type="text"/>	Balance	<input type="text" value="\$"/>
Interest Rate	<input style="text-align: right; width: 50px;" type="text" value="%"/>	Minimum Repayment	<input type="text" value="\$"/>
Actual Repayment	<input type="text" value="\$"/>	Credit Limit	<input type="text" value="\$"/>
Base LVR	<input type="text"/>	Margin Call LVR	<input type="text"/>
Current LVR	<input type="text"/>		

Personal Insurance

CLIENT ONE

CLIENT TWO

Life & TPD Insurance: Yes (Provide Details) No See Attached

Insurance Company	<input type="text"/>	<input type="text"/>
Policy Type	<input type="text"/>	<input type="text"/>
Policy Number	<input type="text"/>	<input type="text"/>
Commencement Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Sum Insured (Death)	\$ <input type="text"/>	\$ <input type="text"/>
Sum Insured (TPD)	\$ <input type="text"/>	\$ <input type="text"/>
Terminal Illness	\$ <input type="text"/>	\$ <input type="text"/>
Buy Back	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Premium	\$ <input type="text"/>	\$ <input type="text"/>
Annual Notice Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Benefits / Exclusions / Notes:	<input type="text"/>	

CLIENT ONE

CLIENT TWO

Trauma Insurance: Yes (Provide Details) No See Attached

Insurance Company	<input type="text"/>	<input type="text"/>
Policy Type	<input type="text"/>	<input type="text"/>
Policy Number	<input type="text"/>	<input type="text"/>
Commencement Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Owner	<input type="text"/>	<input type="text"/>
Buy Back	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Reinstatement	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Premium	\$ <input type="text"/>	\$ <input type="text"/>
Annual Notice Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Benefits / Exclusions / Notes:	<input type="text"/>	

CLIENT ONE

CLIENT TWO

Income Protection: Yes (Provide Details) No See Attached

Insurance Company	<input type="text"/>	<input type="text"/>
Policy Type	<input type="text"/>	<input type="text"/>
Policy Number	<input type="text"/>	<input type="text"/>
Commencement Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Monthly Benefit	\$ <input type="text"/>	\$ <input type="text"/>
Agreed / Indemnity Value	<input type="radio"/> Agreed <input type="radio"/> Indemnity	<input type="radio"/> Agreed <input type="radio"/> Indemnity
Waiting Period	<input type="text"/>	<input type="text"/>
Annual Notice Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Benefit Period	<input type="text"/>	<input type="text"/>
Benefits / Exclusions / Notes:	<input type="text"/>	

Insurance Planning-Life**Client One****Client Two**

Percentage of income to replace:

For how long:

Debt to clear:

Return profile assumption:

% Projection Rate Agreed

% Projection Rate Agreed

Funeral costs:

Medical costs:

Education expenses:

Early childcare costs eg nanny:

Inheritance:

Other:

Insurance Planning-TPD

Percentage of income to replace:

For how long:

Debt to clear:

Return profile assumption:

% Projection Rate Agreed

% Projection Rate Agreed

Medical costs:

Education expenses:

Home / vehicle modifications:

Early childcare costs eg nanny:

Other:

Insurance Planning-Trauma

Percentage of income to replace:

For how long:

Debt to clear:

Medical costs:

Education expenses:

Home / vehicle modifications:

Other:

Insurance Planning-IllnessAmount of income to
replace (max 75%):

Additional or inclusive to TPD cover?

Waiting period?

Cashflow (Income & Expenses)

Personal Income	Client One	Client Two	Personal Expenses	Client One	Client Two
Gross Salary	<input type="text"/>	<input type="text"/>	Food	<input type="text"/>	<input type="text"/>
Plus Other Income	<input type="text"/>	<input type="text"/>	Entertainment	<input type="text"/>	<input type="text"/>
Investment Income	<input type="text"/>	<input type="text"/>	Papers / Magazines	<input type="text"/>	<input type="text"/>
Rental Income	<input type="text"/>	<input type="text"/>	Child Care	<input type="text"/>	<input type="text"/>
Interest Income	<input type="text"/>	<input type="text"/>	Child Maintenance	<input type="text"/>	<input type="text"/>
Shares/Equity Income	<input type="text"/>	<input type="text"/>	Education Expenses	<input type="text"/>	<input type="text"/>
Centrelink/Pension	<input type="text"/>	<input type="text"/>	Dry Cleaning	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	Alcohol	<input type="text"/>	<input type="text"/>
Total Income	\$ <input type="text"/>	\$ <input type="text"/>	Cigarettes	<input type="text"/>	<input type="text"/>
Less Deductions			Personal Needs	<input type="text"/>	<input type="text"/>
Superannuation Sacrifice	<input type="text"/>	<input type="text"/>	Tools / Books / Hobbies	<input type="text"/>	<input type="text"/>
Fringe Benefits	<input type="text"/>	<input type="text"/>	Furnishings	<input type="text"/>	<input type="text"/>
Investment Expenses	<input type="text"/>	<input type="text"/>	Rates	<input type="text"/>	<input type="text"/>
Income Protection Insurance	<input type="text"/>	<input type="text"/>	Electricity	<input type="text"/>	<input type="text"/>
Accountancy Fee	<input type="text"/>	<input type="text"/>	Telephone	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	Gas	<input type="text"/>	<input type="text"/>
Taxable Income	\$ <input type="text"/>	\$ <input type="text"/>	Work / Union Fees	<input type="text"/>	<input type="text"/>
Less			Holidays	<input type="text"/>	<input type="text"/>
Income Tax	<input type="text"/>	<input type="text"/>	Clothing	<input type="text"/>	<input type="text"/>
Fringe Benefits Tax	<input type="text"/>	<input type="text"/>	Presents	<input type="text"/>	<input type="text"/>
Medicare Levy	<input type="text"/>	<input type="text"/>	Donations / Gifts	<input type="text"/>	<input type="text"/>
After Tax Income	\$ <input type="text"/>	\$ <input type="text"/>	Registration & Insurance	<input type="text"/>	<input type="text"/>
Plus			Health Insurance	<input type="text"/>	<input type="text"/>
Expected Tax Rebate	<input type="text"/>	<input type="text"/>	Life / Trauma Insurance	<input type="text"/>	<input type="text"/>
Non Taxable Centrelink	<input type="text"/>	<input type="text"/>	House Repairs/Maintenance	<input type="text"/>	<input type="text"/>
Investment Rebate	<input type="text"/>	<input type="text"/>	Medical & Dental	<input type="text"/>	<input type="text"/>
Shares Franking Credits	<input type="text"/>	<input type="text"/>	Rent	<input type="text"/>	<input type="text"/>
Depreciation Allowances	<input type="text"/>	<input type="text"/>	Primary Residence Loan	<input type="text"/>	<input type="text"/>
Other			Investment Property Loan	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Other	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Disposable Income	\$ <input type="text"/>	\$ <input type="text"/>	Personal Expenses	\$ <input type="text"/>	\$ <input type="text"/>
Joint Disposable Income	\$ <input type="text"/>		Joint Personal Expenses	\$ <input type="text"/>	
Joint Disposable Income - Joint Personal Expenses =			Cash Flow Surplus / Deficit		
<input type="text"/>			<input type="text"/>		

How important is?

Please rank in order of priority

	No Preference	Not Important	Important	Very Important	Priority*
Simplicity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Inflation protection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Generating a regular income	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Taxation benefits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
The ability to access your Adviser on a regular basis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Being debt free	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Planning for / funding your retirement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Having a sum insured that does not reduce as you age	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Funding insurance compared to retirement savings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Current cashflow compared to future retirement savings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Paying advice fees from your product rather than your cashflow	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

*The setting of priority is an internal value set by the Adviser should they wish to set up the order in which they are going to address the client's needs. A lower number has a higher priority.

Disclosures & Authority to Prepare Advice Document

Client One

Client Two

1. The information provided in this Fact Find accurately documents my/our relevant personal circumstances and attitude to risk and return. I am/We are not aware of any other material information relevant to the provision of financial product or strategy advice and understand that this information is the basis on which my/our financial adviser and their associated Australian Financial Services Licensee (AFS Licensee) will provide advice.

Yes No

Yes No

2. I/We have received, read and understood my/our financial advisers and their associates AFS Licensee's Financial Services Guide (FSG) version , SFGS version and FSG Fee Insert version provided on / / .

Yes No

Yes No

3. Unless I/we have specifically requested otherwise, I/we confirm and consent to the collection, use and disclosure of my/our personal information in accordance with the procedures outlined in my financial adviser's Privacy Policy already received (additional copies are available on request). This Privacy Policy includes information as to which (if any) foreign countries we share information with. I/We acknowledge that we have received a copy of the Privacy Policy and agree to the collection of information in accordance with this.

Yes No

Yes No

Client 1 Privacy Consent: Client 2 Privacy Consent:

4. I/We wish to be placed on the "No Contact/ No Call" register which entitles me/us not to be contacted regarding any financial products without my/our express consent, unless I/we specifically request otherwise. Note, if you select YES, this means you are unable to be contacted by your financial adviser about alternative products and services that may benefit you.

Yes No

Yes No

5. I/We wish to receive relevant Product Disclosure Statements, Financial Services Guides, Privacy Policies and Statements of Advice by either Paper Copy or Electronically via Email

Yes No

Yes No

6. Tax File Number Authority

I/We agree to the collection and retention of my/our Tax File Number/s ('TFN/s') by my/our financial adviser and their associated Australian Financial Services Licensee (AFS Licensee).

I/We understand that it will be used in connection with providing financial product and strategy advice and only in accordance with the legislative requirements (e.g. relevant taxation and superannuation laws). I/We understand that my/our financial planner and their associated AFS Licensee may provide my/our TFN/s to relevant financial institutions (e.g. life insurance companies and fund managers) and Government bodies (e.g. Australian Taxation Office and Centrelink) as required and only in accordance with the law, unless I/we specifically request otherwise in writing.

I/We understand that I/we do not have to supply my/our TFN/s and that it is not an offence not to do so. I/We further understand that if I/we choose not to supply my/our TFN/s, I/we may be taxed at a higher marginal rate than if I/we had supplied my/our TFN/s.

I/We understand that my/our TFN/s will be stored and treated as confidential and that my/our financial planner and their associated AFS Licensee will take all reasonable steps to prevent the loss, disclosure and/or misuse of my/our TFN/s by third parties.

Client 1 Tax File Number: Client 2 Tax File Number:

6. Preparation of Advice document

I/We request that Infocus prepares an Advice document following my/our initial discussions and on confirming the subject matter of our advice to be;

I/We agree that I/we will pay: \$ per hour OR \$ (set fee) for the preparation and presentation of the Advice document, payable on presentation of the Advice document.

Client 1 Name Signature Date / /

Client 2 Name Signature Date / /

Adviser Name Signature Date / /



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Contacting Infocus Wealth Management:

To update your information, remove your name from our mailing list, access your information, or if you have an enquiry or complaint, please contact Infocus Head Office on 07 5458 9400 or write to: Infocus Wealth Management, PO Box 1856, SUNSHINE PLAZA QLD 4558.