

Confidential Client Information

Please read the important notice below

The Corporations Act requires that an adviser providing financial services advice must have reasonable grounds for providing that advice. This means that the adviser must conduct appropriate inquiries as to the investment objectives, financial situation and particular needs of the person concerned. The information requested in this form is necessary to enable a recommendation to be made on a reasonable basis and will be used for that purpose.

Please complete as much as you can. If you are unsure please leave it blank and we will assist you at our appointment.

Client Name/s: _____

Date: _____

AUTHORISED REPRESENTATIVES NAME:

Accountants.com Pty Ltd

Authorised Representative No **323706**

ABN **61 120 625 649**

**Suite 4 Level 5 1 Elizabeth Plaza
North Sydney, NSW, 2060**

Tel : 99568008

Fax : 85690242

Email : Norbert@accountants.com.au

YOUR PERSONAL DETAILS

CLIENT 1

Title: Mr Mrs Miss Other.....
Surname.....
Given Names.....
Preferred Name.....
Date of Birth/...../.....
Age.....
Country of Birth.....
Sex: Male Female
Marital Status.....

CLIENT 2

Title: Mr Mrs Miss Other.....
Surname.....
Given Names.....
Preferred Name.....
Date of Birth/...../.....
Age.....
Country of Birth.....
Sex: Male Female
Marital Status.....

WHERE CAN WE CONTACT YOU?

Home Address.....
Suburb/Town.....
State.....Postcode.....
Postal Address.....
Suburb/Town.....
State.....Postcode.....
Home Telephone ().....
Work Telephone ().....
Fax or Mobile ().....
Mobile ().....
e-mail.....

Other Address.....
Suburb/Town.....
State.....Postcode.....
Other Address.....
Suburb/Town.....
State.....Postcode.....
Home Telephone ().....
Work Telephone ().....
Fax or Mobile ().....
Mobile ().....
e-mail.....

DO YOU HAVE OTHER PROFESSIONAL ADVISERS?

Accountant Name..... Telephone ().....
Address.....
Solicitor Name..... Telephone ().....
Address.....

Do we have authority to contact your professional advisers?

Yes No

YOUR ASSETS AND LIABILITIES

| | Assets \$ | Liabilities \$ | Ownership | | |
|--------------------------------|-----------|----------------|--------------------------|--------------------------|--------------------------|
| ASSETS | | | Client1 | Client2 | Joint |
| Lifestyle Assets | | | | | |
| PRINCIPAL RESIDENCE | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Motor Vehicles | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Home Contents | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Collectables | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Caravan | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Boat | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Holiday Home | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | |
| Investment Assets | | | | | |
| Investment Property | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cash and Bank Deposits | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Business Interests | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shares | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Life Insurance Policies | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Superannuation | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other Assets | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Total Assets (A) | | | | | |
| | | | | | |
| OTHER LIABILITIES | | | | | |
| Personal Loans/Overdrafts, etc | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Credit Cards, etc | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other Liabilities | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Total Liabilities (L) | | | | | |

NET ASSETS (A) – (L) =
\$.....

Please attach the latest statement for any of your Assets & Liabilities where available.

SUPER DETAILS

Client 1 **Client 2**

Fund Name
TYPE OF FUND
DATE JOINED/...../.....
Contributions (self)
Contributions (Employer)
Life Cover
Current Value\$.....
Transfer Value\$.....
Policy Number
Maturity Value Age/Date

Fund Name
TYPE OF FUND
DATE JOINED/...../.....
Contributions (self)
Contributions (Employer)
Life Cover
Current Value\$.....
Transfer Value\$.....
Policy Number
Maturity Value Age/Date

Fund Name
TYPE OF FUND
DATE JOINED/...../.....
Contributions (self)
Contributions (Employer)
Life Cover
Current Value\$.....
Transfer Value\$.....
Policy Number
Maturity Value Age/Date

YOUR INCOME AND EXPENDITURE

| INCOME | CLIENT 1 \$ | CLIENT 2 \$ | JOINT \$ |
|---------------------|-------------|-------------|----------|
| GROSS SALARY | | | |
| Investment Income | | | |
| DSS Pensions | | | |
| Non-Taxable Income | | | |
| Other Income | | | |
| | | | |
| TOTALS | | | |

EXPENDITURE

| | | | |
|------------------------|-------|-------|-------|
| Income Tax | ..... | ..... | ..... |
| Rent / Mortgage | ..... | ..... | ..... |
| Household Expenses | ..... | ..... | ..... |
| Motor Vehicle Expenses | ..... | ..... | ..... |
| Medical | ..... | ..... | ..... |
| Education | ..... | ..... | ..... |
| Entertainment | ..... | ..... | ..... |
| Insurance | ..... | ..... | ..... |
| Personal Loans | ..... | ..... | ..... |
| Credit Cards | ..... | ..... | ..... |
| Other Expenses | ..... | ..... | ..... |
| | | | |
| | | | |
| TOTALS | ..... | ..... | ..... |

INCOME SURPLUS/DEFICIT
(INCOME LESS EXPENDITURE ETC)

Your minimum income required \$.....

Surplus income available for investment \$.....

Please advise us whether these are weekly, fortnightly, monthly or annual figures.

Other income or expenses
(e.g. details of any extraordinary expenses or payments you may receive or are planning for in the next twelve months or so i.e. inheritance, family holiday. If you are receiving a government pension is there anything we should be aware of about this?)

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INSURANCE POLICIES

| POLICY DETAILS (CLIENT 1) | LIFE | TPD | TRAUMA | INCOME PROTECTION | BUSINESS EXPENSES |
|---------------------------|------|-----|--------|-------------------|-------------------|
| Company | | | | | |
| Coverage Amount | | | | | |
| Premium | | | | | |
| OWNED BY | | | | | |
| Waiting Period | | | | | |
| Benefit Period | | | | | |
| Last Review Date | | | | | |
| Adviser Name | | | | | |
| Owner | | | | | |

| POLICY DETAILS (CLIENT 2) | LIFE | TPD | TRAUMA | INCOME PROTECTION | BUSINESS EXPENSES |
|---------------------------|------|-----|--------|-------------------|-------------------|
| Company | | | | | |
| Coverage Amount | | | | | |
| Premium | | | | | |
| OWNED BY | | | | | |
| Waiting Period | | | | | |
| Benefit Period | | | | | |
| Last Review Date | | | | | |
| Adviser Name | | | | | |
| Owner | | | | | |

Due to the complex nature of Insurance policies please attach the latest statement or policy document for any of your insurances where available.

Notes about your insurances

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Risk Profile

Personal Investment Preferences

Time Horizons

| | |
|------------------|-------------------------|
| At Call | \$ <input type="text"/> |
| 1 Year | \$ <input type="text"/> |
| 2 – 3 Years | \$ <input type="text"/> |
| 3 – 4 Years | \$ <input type="text"/> |
| 5 – 7 Years | \$ <input type="text"/> |
| 7 Years Plus | \$ <input type="text"/> |
| Retirement | \$ <input type="text"/> |
| Total Investment | \$ <input type="text"/> |

Risk Profile Questionnaire

The following questions are designed to determine your risk profile taking into account your financial needs, circumstances and objectives. This is an important process in assisting to identify an appropriate investment strategy and make recommendations that suit your specific requirements.

Please circle your preferences

Question 1 (Your liquidity requirements, i.e. having access to your funds)

Apart from short term and anticipated liquidity needs, how long do you envisage before requiring access to **most** of your funds?

1. Less than one year.
2. 1 to less than 3 years.
3. 3 to less than 5 years.
4. 5 years plus.

Question 2 (your investment experience)

How familiar are you with investment markets?

1. No experience at all.
2. Not familiar but am willing to consider investment alternatives.
3. I understand that the markets fluctuate and different market sectors have different income, growth and taxation characteristics. I recognise the importance of diversification.
4. Experience with all investment sectors and understand the various factors which may influence performance.

Question 3 (Your attitude to risk)

Which of the following best describes your attitude to the volatility or returns?

1. I prefer lower capital growth in order to avoid volatile returns.
2. I aim to achieve steady capital growth and will accept some volatility of returns.
3. I am prepared to take on higher volatility for the opportunity of greater returns.
4. I am interested in aggressive growth strategies, including borrowing for investment purposes, and understand the possibility of negative returns.

Question 4 (your investment objectives)

What do you want your investments to achieve?

1. Security of capital with minimal opportunity for capital growth.
2. Generate an income stream with less emphasis on growth.
3. Achieve steady capital growth with less emphasis on income.
4. High capital growth and minimal income.

Question 5 (your concerns about inflation)

How concerned are you that the value of your capital and the purchasing power of your investment income should keep pace with or exceed the rate of inflation?

1. Not concerned.
2. Slightly concerned.
3. Moderately concerned.
4. Highly concerned.
5. Extremely concerned.

Question 6 (Your concerns about taxation)

Are you prepared to invest in tax-advantaged investments that may fluctuate in value, in order to minimise your income tax?

1. No – I do not want to purchase any investments that may lead to capital fluctuation.
2. Maybe – I would prefer stable, reliable capital value and returns with some tax savings, if possible.
3. Yes – I can accept some fluctuation in capital value from time to time in exchange for some tax advantages.
4. Definitely – my main objective is to minimise income tax and I am prepared to accept capital fluctuation to achieve this.

Question 7 (Your investment preference)

Which of the following best describes your attitude to choosing an investment?

2. I prefer investments that do not have any capital fluctuation associated with them.
4. I prefer to diversify with a mix of investments, which have an emphasis on low capital fluctuation. I can accept having a small proportion of the portfolio invested in assets which have a higher degree of short term fluctuations in order to potentially achieve a slightly higher return over the longer term. I understand that these types of investments can produce a negative return in at least 1 year in every 9 years.
6. I prefer to have a spread of investments in a balanced portfolio. I understand that this type of portfolio can produce a negative investment return in at least 1 year in every 7 years.
8. I prefer to diversify my investments with an emphasis on more investments, which have potentially higher returns, but still having a small amount of stable investments. I understand that these types of investments can produce a negative return in at least 1 year in every 5 years.
10. I prefer to select investments that have a higher degree of capital fluctuation so that I can earn higher returns over the long term. I understand that this higher volatility means that a negative return can occur in at least 1 year within every 3 years.

These questions are optional and will not impact on the outcome of the risk profile questionnaire, however they may be used to confirm your understanding of the risk profile.

Question 8 (your desired rate of return – generally the expectations of high returns requires a higher acceptance of investment risk and volatility)

What average long term rate of return do you reasonably expect to achieve from your investments?

1. Less than 5%
2. 5 – 7%
3. 7 – 10%
4. Above 10% (please state expected range eg. 120-12%) _____%

Question 9 (Your investment risk time frame – in two parts)

For how long would you be prepared to see your investments under perform before you cashed them in or wanted to switch?

Part a) If the under performance was consistent with the market or specific sectors;

Or

Part b) If the under performance was out of step with the market or specific sectors;

NB: There are often different tolerance time frames for each scenario.

Part a)

1. I would cash in or switch if there was any loss in value.
2. Less than 1 year.
3. Up to two years.
4. More than two years.

Part b)

1. I would cash in or switch if there was any loss in value.
2. Less than 1 year.
3. Up to two years.
4. More than two years.

Total Score: _____

Additional Notes

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Client Risk Profiles:

Defensive (8 to 11)

Your investment style would suggest that you do not wish to take any investment risk. Your main priority is the safeguarding of your investment capital, and you are prepared to sacrifice higher returns for peace of mind. Generally, the most appropriate strategy for someone with a **Defensive** approach to investing is 100% in income producing assets. With your investment style it is important you understand the likelihood of and are prepared to accept negative returns approximately 1 year in every 20 years. A defensive approach is also appropriate when the term of the investment is between 2 to 3 years.

Conservative (12 to 17)

Your investment style would suggest that you are prepared to accept a small amount of risk however, your priority remains the preservation of your capital over the medium to long term. Generally, the most appropriate strategy for someone with a **Conservative** approach to investing is to invest 70% in income and 30% in growth assets. With your investment style it is important that you understand the likelihood of and are prepared to accept negative returns approximately 1 year in every 8 years. A conservative approach is also appropriate when the term of the investment is between 2 to 3 years.

Moderate (18 to 25)

Your investment style would suggest that you have some understanding of the investment markets and their behaviour, and are prepared to take short term risk in order to gain longer term capital growth. Generally, the most appropriate strategy for someone with a **Moderate** approach to investing is to invest 40% in income and 60% in growth assets. With your investment style it is important that you understand the likelihood of and are prepared to accept negative returns approximately 1 year in every 6 years. A moderate approach is also used when the term of the investment is between 3 to 4 years.

Growth (26 to 31)

Your investment style would suggest that you are seeking a greater growth component in your investment portfolio, and although you remain cautious towards taking extreme levels of risk, your general understanding of the investment market enables you to feel comfortable with short term risk. Your priority is consistent capital growth with some income to smooth volatility in your returns. Generally, the most appropriate strategy for someone with a **Growth** approach to investing is to invest 20% in income and 80% in growth assets. With your investment style it is important that you understand the likelihood of and are prepared to accept negative returns approximately 1 year in every 5 years. A growth approach is also used when the term of the investment is between 4 to 5 years.

Aggressive, International Shares, Australian Shares(32 to 35)

Your investment style would suggest that you are most interested in maximising the value of your investments through the long term capital growth, although you do not wish to make unbalanced investment decisions. You are prepared to sacrifice short term safety in order to maximise long term capital growth. Generally, the most appropriate strategy for someone with an **Aggressive** approach to investing is to invest 100% in growth assets. With your investment style it is important that you understand the likelihood of and are prepared to accept negative returns approximately 1 year in every 4 years. An aggressive approach is also used when the term of the investment is between 5 to 7 years.

Asset Classes

The asset allocation for each risk profile is as follows:

| Asset Class | Defensive | Conservative | Moderate | Growth | Aggressive | International Shares | Australian Shares |
|-------------------------|-------------|--------------|-------------|-------------|-------------|----------------------|-------------------|
| Cash | 65% | 25% | 5% | 5% | 0% | 0% | 0% |
| Fixed Interest - Bonds | 20% | 30% | 20% | 5% | 0% | 0% | 0% |
| Fixed Interest – Other* | 15% | 15% | 15% | 0% | 0% | 0% | 0% |
| Australian Shares | 0% | 15% | 30% | 45% | 50% | 0% | 100% |
| International Shares | 0% | 10% | 20% | 35% | 50% | 100% | 0% |
| Property | 0% | 5% | 10% | 10% | 0% | 0% | 0% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% | 100% |

Notes: A 10% variation on each sector is acceptable when structuring your portfolio.

An allocation of 10% in portfolios moderate, growth and aggressive can be allocated to alternative investments. Alternative investments include agricultural investments, fund of fund hedge funds and single strategy hedge funds.

Growth portfolios and aggressive portfolio can reduce Australian shares and international shares exposure and include up to 20% fixed interest other.

* Fixed Interest Other means 1st and 2nd Mortgage Funds, Income and Property Development Funds (Defensive and conservative portfolios can not contain 2nd Mortgage and Development Funds).

Acknowledgement of Completed Risk Profile

I acknowledge that I have answered the questions in the Risk Profiler to the best of my knowledge.

Name: _____

Signature: _____

Name: _____

Signature: _____

Date: _____

DECLARATIONS

YOUR TAX FILE NUMBERS

From time to time we will be requested to supply your Tax File Numbers to product issuers. Please indicate whether you grant us authority to do this and retain it on our files.

| | TAX FILE NUMBER | AUTHORITY |
|-----------|--|--|
| CLIENT 1: | <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 checked="" type="checkbox"/> or <input checked="" type="checkbox"/> |
| CLIENT 2: | <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 checked="" type="checkbox"/> or <input checked="" type="checkbox"/> |

Tax File Numbers will only be used where written authority has been obtained from you.

Tax File Number Declaration

By completing and signing this declaration, I/We are authorising our Wealthsure Authorised Representative, to hold my Tax File Number in a secure location and use it for the following financial product and strategy recommendations related purposes/documents, in accordance with the legislative requirements:

- Matters for superannuation investment purposes as required by the Superannuation Laws; such as inclusion on Application forms
- Matters for non-superannuation investment purposes as required by the Taxation Laws; such as inclusion on Application forms
- That I/we have been informed of the legal basis for collection and are aware that declining to provide a TFN is not an offence and know the consequences of not providing a TFN.
- That the manner of obtaining the TFN was not reasonably intrusive.
- The disclosure of the TFN will only be disclosed to Fund Managers and Life Insurance Companies as relevant.
-

Tax File Authorisation

Signed:..... Signed:.....

Date: Date:

PRIVACY ACT

Where we retain your information and use that information in the future we are obliged to seek your consent. Please indicate your decision on the following by checking the applicable box.

| | | | |
|---|-------------------------------------|----|-------------------------------------|
| - I/We would like to be kept informed of any new products or services as they arise. | <input checked="" type="checkbox"/> | or | <input checked="" type="checkbox"/> |
| - I/We authorise you to provide personal financial information to third parties as required. | <input checked="" type="checkbox"/> | or | <input checked="" type="checkbox"/> |
| - I/We authorise you to provide all personal information in relation my financial investments to my spouse. | <input checked="" type="checkbox"/> | or | <input checked="" type="checkbox"/> |

| | |
|--|--|
| | I/We wish to be placed on a “No Call/No Contact Register” which entitles me/us not to be contacted regarding any financial products without my express consent, unless otherwise directed. Tick 4 if applicable. |
|--|--|

