

## Changing your personalised fee structure

This form allows you and your financial adviser to negotiate a change to any part of the personalised fee structure on your AMP investment account.

Please print in CAPITAL LETTERS and place a cross  in any applicable boxes.

### 1. Investor details

Client number

Investor name(s)

Investor name(s)

Address

  


Suburb

State

Postcode

Email address

Contact number

### 2. Fees agreed with your adviser

Information about advice fees is provided in the 'Fees and other costs' section of the relevant PDS.

#### Ongoing advice fee

Please indicate the monthly ongoing advice fee agreed with your financial adviser. The fee you indicate will be inclusive of GST.

 % or \$ 

If you do not indicate an amount, an ongoing advice fee of 0.0% will be assumed.

### 3. Declaration and signature(s)

I/We declare that:

- I/we have read and understood the information in the current PDS(s) relating to the ongoing advice fee.
- I/we have agreed with my/our financial adviser the changes to my/our personalised fee structure specified above and request AMP to give effect to the fee changes.
- I/we agree that AMP may deduct the fees specified above from any payment due to me/us or redeem the number of units required to meet those fees.

### 3. Declaration and signature(s) (continued)

- I/we confirm that the changes agreed only relate to the services my/our financial adviser provides for my/our AMP investment account, and not to other advice/services my financial adviser is also providing to me/us.
- I/we acknowledge and agree to the maximum extent permitted by law to release, discharge and indemnify the responsible entity from and against all actions, proceedings, accounts, costs, expenses, charges, liabilities, claims and demands arising directly or indirectly as a result of the instructions given in this form.
- I/we acknowledge that this request is subject to the terms and conditions set out in the PDS for the relevant fund and the constitution of those funds as amended, including that this request will be cancelled if a wind up of the fund commences.

#### Signatory 1

Title

Surname

Given name

Signing as (please cross)

- Individual     Sole trader     Trustee  
 Director     Joint investor     Partner  
 Sole director     Agent     Attorney

- Representative of association/co-operative/government body – please specify position (eg chairman)

Signature

Date

**Issuer and Responsible Entity** ipac Asset Management Limited (ABN 22 003 257 225, AFSL 234655) referred to in this form as 'the Responsible Entity'.

**Fund Services Provider** National Mutual Funds Management Ltd (ABN 32 006 787 720, AFSL 234652) referred to in this form as 'NMF', 'we' or 'us'.

**Enquiries:** Please call our Client Services team on 133 267 between 8.30am and 5.30pm Sydney time, Monday to Friday.

### 3. Declaration and signature(s) (continued)

#### Signatory 2

Title

Surname

Given name

Signing as (please cross)

Joint investor  Trustee  Company secretary

Partner  Director  Agent

Attorney

(if more than two attorneys, please provide names and signatures)

Representative of association/co-operative/government body – please specify position (eg chairman)

Signature

Date

### 4. Financial adviser details (adviser use only)

Financial adviser name

Adviser code

Contact number

Dealer group

Company name

#### Ongoing advice fee

Is your supply of advice to your client GST-free?

Yes  No

If 'Yes', please specify why the supply is GST-free

If an ongoing advice fee has been agreed and indicated in section 3 of this form, I agree and confirm that:

1. The ongoing advice fee is payable in respect of my supply of advice to the investor(s) identified in section 1.
2. AMP will act as my agent in making the supply of that advice.
3. For the purposes of GST law, AMP will be treated as making supplies to the investor(s) and I will be treated as making corresponding supplies to AMP.

### 4. Financial adviser details (adviser use only) (continued)

#### Ongoing advice fee (continued)

4. AMP will, where appropriate, issue tax invoices and adjustment notes relating to the supplies to the investor(s) and I will not issue tax invoices and adjustment notes relating to those supplies.

5. Points 2, 3 and 4 above will cease to have effect if either I or AMP cease to be GST registered.

In accordance with section 153B of the *A New Tax System (Goods and Services Tax) Act 1999*, I will be treated as making supplies to AMP in return for the annual ongoing advice fee and this will be included on the Recipient – Created Tax Invoice AMP will issue when it pays me.

#### 5. Financial adviser signature

I declare that:

- I have disclosed to my client, the investor(s) identified in section 1, all relevant information relating to the ongoing advice fee and agreed with my client the changed personalised fee structure specified above.
- The changes agreed only relate to the services I provide to my client for this AMP investment account.
- I request AMP to give effect to the fee changes specified above.

Financial adviser signature

Name (Print in CAPITAL LETTERS)

Date

#### Where to send this form

Mail (no stamp required) or email this completed form to:

National Mutual Funds Management Ltd  
Reply Paid 125  
PARRAMATTA NSW 2124  
trustinfo@amp.com.au

amp.com.au