

16.0 Adviser/Credit Representative Declaration**16.1 Advice Planning Scope | Confirmation**

Investment Planning		Superannuation Planning	
Personal savings plans	<input type="checkbox"/>	Consolidation	<input type="checkbox"/>
Direct shares	<input type="checkbox"/>	Contribution strategies	<input type="checkbox"/>
Margin lending	<input type="checkbox"/>	Transition to retirement	<input type="checkbox"/>
Gearing	<input type="checkbox"/>	Retirement building	<input type="checkbox"/>
Managed investments	<input type="checkbox"/>	Salary sacrificing	<input type="checkbox"/>
Review of existing portfolio/position	<input type="checkbox"/>	Review of existing portfolio/position	<input type="checkbox"/>
Other:	<input type="checkbox"/>	Other:	<input type="checkbox"/>
Financial Planning		Retirement Planning	
Estate planning	<input type="checkbox"/>	Retirement income streams	<input type="checkbox"/>
Debt management	<input type="checkbox"/>	Retirement funding	<input type="checkbox"/>
Aged care	<input type="checkbox"/>	Social security	<input type="checkbox"/>
Salary packaging	<input type="checkbox"/>	Review of existing portfolio/position	<input type="checkbox"/>
Other:	<input type="checkbox"/>	Other:	<input type="checkbox"/>
Insurance Planning		Self Managed Superannuation Fund	
Personal insurance	<input type="checkbox"/>	New SMSF	<input type="checkbox"/>
Review of existing portfolio/position	<input type="checkbox"/>	Other:	<input type="checkbox"/>
Other:	<input type="checkbox"/>	Other:	<input type="checkbox"/>

16.2 Documentation Checklist

The information recorded in this Client Data Form was provided during a discussion held on

The FSG and Adviser Profile were provided to the above mentioned client(s) on

The version number of the FSG provided was

The client's risk profile questionnaire was completed on

The Credit Guide was provided to the above mentioned client(s) on

The version number of the Credit Guide provided was

Adviser/Credit Representative's Signature

Adviser/Credit Representative's Number

☐ n/a

☐ n/a

 Sign Here
Office Use Only – AML/CTF Checklist

Has the required identification from the client and/or beneficial owners been collected and maintained on the file? (beneficial ownership is ownership of 25% or more)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the source of wealth and/or funds to be invested been identified? (e.g. inheritance, sale of property)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the risk assessment form been completed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No