****

**PRIVATE & CONFIDENTIAL**

CLIENT DATA COLLECTION &  
NEEDS ANALYSIS

Prepared for:

{preparedfor}

Your adviser

{youradviser}

Dated:

{dated}

**Financial Services provided under   
Australian Financial Services Licence No. 471728**

**ABN: 63 603 558 658**

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*This Data Collection Sheet is designed to provide you, the Investment Collective representative with accurate, detailed information as to your current personal and financial position. This information is required under the Corporations Law so that your adviser has reasonable grounds for making their recommendations. The information contained within this document will be used solely by your adviser for the purpose of making recommendations and will be treated in the strictest of confidence.*

## Why are we asking all of these questions?

We collect your personal information in detail to ensure that we can provide you with the most appropriate recommendations. Financial planning involves the following steps:

* Understanding the client’s goals and objectives;
* Understanding the client’s financial position in detail; and
* Analysing all issues and options, in order to formulate recommendations that are most appropriate for the client.

We are also required by law to collect appropriate personal information from our clients. For example, ***The Corporations Act 2001*** requires that we identify a client’s needs, objectives and financial circumstances before providing advice, and the ***Anti-Money Laundering and Counter Terrorism Financing Act 2006*** (Cth) requires that we formally identify and verify the identity of all clients.

## Do I need to answer all of these questions?

Not all of the questions will be applicable for all clients. You can leave blank, anything that does not apply to your situation.

* [***Section A – Personal Details***](#SectionA)
* Please provide all details requested.
* [***Section B – Financial Summary***](#SectionB)
* Ensure that all income details are provided, including Centrelink income (if applicable)
* Complete the [cost of living](#Costofliving) section on page 8, or the summary on page 9
* Include details of all your assets (home, bank accounts etc.), including investment assets such as properties, shares etc.
* If you have superannuation in accumulation phase, a self-managed superannuation fund, or draw an income from superannuation – complete the relevant details.
* Provide full details of any liabilities.
* Include details on your business, if applicable.
* [***Section C – Other taxation structures***](#SectionC)
* If you have a family trust or company, please provide details here.
* [***Section D – Estate Planning***](#SectionD)
* Complete details regarding your existing Will, or Power of Attorney, or tick ‘No’ if you do not have one.
* [***Section E – Insurance***](#SectionE)
* Include details of any life insurance, TPD, trauma and income protection insurance. If you have no insurance, please leave blank.
* Include your general insurance details i.e. home and contents, motor vehicle.
* Complete the Notes section at the bottom of Page 16, if applicable
* [***Section F – Financial Planning Objectives***](#SectionF)
* Complete the questionnaire starting on Page 17
* Include details of any major future expenses, so that they can be taken into consideration in the planning process, or leave blank if none.
* Pages 18 and 19 include some objectives that may help identify your goals – complete any that are relevant, or leave blank.
* [***Section G – Personal Investment Preferences***](#SectionG)
* Please complete this questionnaire in full and sign on page 24.
* [***Section H – Adviser & Client Declarations***](#SectionH)
* Please read and sign this declaration.
* [***Centrelink Consent Script***](#SectionH)
* If you are a Centrelink Client, please complete and sign the form on page 27.
* [***Client Authority to Access Information***](#Faxform)
* Please complete and sign this page, as your adviser needs this document to obtain the required details of your investments, superannuation or any other financial information.

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| SECTION A – PERSONAL DETAILS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Personal Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Client 1** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Client 2** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surname & Maiden Name | {SurnameMaidenName\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {SurnameMaidenName\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Given name/s | {Givennames\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Givennames\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Preferred *(short)* name | {Preferredshortname\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Preferredshortname\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title *(Mr, Mrs, Ms, Sir, Dr)* | {TitleMrMrsMsSirDr\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {TitleMrMrsMsSirDr\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gender | Male | | | | | | | | | | | | | | | | gM1 | | | | Female | | | | | | | | | | | | | | | | gF1 | | | | Male | | | | | | | | | | | | | | | | | gM2 | | | | Female | | | | | | | | | | | | | | | | | gF2 | | |
| Date of birth | d11 | | | | d12 | | | | | d13 | | | | | | d14 | | | | | d15 | | | | d16 | | | | | d17 | | | | | | d18 | | | | | d21 | | | | | d22 | | | | | d23 | | | | | | d24 | | | | | d25 | | | | d26 | | | | | d27 | | | | | | | d28 | | | |
| Age | {Age\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Age\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Marital status | Married | | | | | | | | | | | | | | | | M11 | | | | Divorced | | | | | | | | | | | | | | | | M12 | | | | Married | | | | | | | | | | | | | | | | | M21 | | | | Divorced | | | | | | | | | | | | | | | | | M22 | | |
| Single | | | | | | | | | | | | | | | | M13 | | | | Widow(ed) | | | | | | | | | | | | | | | | M14 | | | | Single | | | | | | | | | | | | | | | | | M23 | | | | Widow(ed) | | | | | | | | | | | | | | | | | M24 | | |
| De facto | | | | | | | | | | | | | | | | M15 | | | | Unknown | | | | | | | | | | | | | | | | M16 | | | | De facto | | | | | | | | | | | | | | | | | M25 | | | | Unknown | | | | | | | | | | | | | | | | | M26 | | |
| Health | Excellent | | | | | | | | | | | | | | | | H11 | | | | Poor | | | | | | | | | | | | | | | | H12 | | | | Excellent | | | | | | | | | | | | | | | | | H21 | | | | Poor | | | | | | | | | | | | | | | | | H22 | | |
| Good | | | | | | | | | | | | | | | | H13 | | | | Unknown | | | | | | | | | | | | | | | | H14 | | | | Good | | | | | | | | | | | | | | | | | H23 | | | | Unknown | | | | | | | | | | | | | | | | | H24 | | |
| Smoker | Yes | | | | | | | | | | | | | | | | S11 | | | | No | | | | | | | | | | | | | | | | S12 | | | | Yes | | | | | | | | | | | | | | | | | S21 | | | | No | | | | | | | | | | | | | | | | | S22 | | |
| Town of birth | {TownOfBirth\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {TownOfBirth\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Country of birth | {CountryOfBirth\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {CountryOfBirth\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If not Australia – years in Australia | {IfnotAustraliayearsinAu\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {IfnotAustraliayearsinAu\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you a non-resident? | {Areyouanonresident\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Areyouanonresident\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tax file number | T11 | | | T12 | | | | | T13 | | | | T14 | | | | | | T15 | | | | T16 | | | | | | T17 | | | T18 | | | | | | T19 | | | | T21 | | | T22 | | | | | T23 | | | | | | T24 | | | | T25 | | | | T26 | | | | T27 | | | | | T28 | | | | | | | T29 | |
| Were you referred to us? | {Wereyoureferredtous\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Wereyoureferredtous\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you worked with another adviser? | {Haveyouworkedwithanoth\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Haveyouworkedwithanoth\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you a resident of another country for tax purposes? | {Areyouaresidentofanother\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Areyouaresidentofanother\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If yes, country of residence | {Ifyescountryofresidence\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Ifyescountryofresidence\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tax identification number (TIN) of foreign country | {TaxidentificationnumberTINof\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {TaxidentificationnumberTINof\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you a politically exposed person? | {Areyouapoliticallyexpos\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Areyouapoliticallyexpos\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Contact Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Client 1** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Client 2** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address (postal) | {Addresspostal\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Addresspostal\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | {Addresspostal2\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Addresspostal2\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | State:{AddPSC1} | | | | | | | | | | | | | | | |  | | | | Postcode:{AddPPC1} | | | | | | | | | | | | | | | |  | | | | State: {AddPSC2} | | | | | | | | | | | | | | | | |  | | | | Postcode:{AddPPC1} | | | | | | | | | | | | | | | | |  | | |
| Address (residential/other) | {Addressresidentialother\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Addressresidentialother\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | State:{AroS\_C1} | | | | | | | | | | | | | | | |  | | | | Postcode:{AroP\_C1} | | | | | | | | | | | | | | | |  | | | | State: {AroS\_C2} | | | | | | | | | | | | | | | | |  | | | | Postcode:{AroP\_C2} | | | | | | | | | | | | | | | | |  | | |
| Email address | {Emailaddress\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Emailaddress\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contact numbers  *(\*main number)* | {Contactnumbersmainnumber\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Contactnumbersmainnumber\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office phone | {Officephone\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Officephone\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mobile | {Mobile\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Mobile\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fax | {Fax\_Client1} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | {Fax\_Client2} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Dependants** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Dependant 1** | | | | | | | | | | | | | | | | | | | | | | | | | | **Dependant 2** | | | | | | | | | | | | | | | | | | | | | | | | | | | **Dependant 3** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surname | {SurnameName\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | | | {SurnameName\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {SurnameName\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Given name/s | {GivenNames\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | | | {GivenNames\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {GivenNames\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Preferred *(short)* name | {PreferredShortName\_D1} | | | | | | | | | | | | | | | | | | | | | | | | | | {PreferredShortName\_D2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {PreferredShortName\_D3} | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title *(Mr, Mrs, Ms, Sir, Dr)* | {Title\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | | | {Title\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {Title\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gender | M | | | | | | Md1 | | | | | | | F | | | | | | | Mf1 | | | | | | M | | | | | | | Md2 | | | | | | | F | | | | | | | Mf2 | | | | | | M | | | | | | | | Md3 | | | | | | | F | | | | | | Mf3 | | | | | | |
| Date of birth | | o11 | o12 | | | | | o13 | | | o14 | | | | o15 | | | o16 | | | | o17 | | o18 | | | | o21 | | | o22 | | | | o23 | | | | o24 | | | | o25 | o26 | | | | | o27 | | | o28 | | | o31 | | | | o32 | | | | o33 | | o34 | | | | | o35 | | o36 | | | | | o37 | | | | o38 |
| Age | | {Age\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | {Age\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {Age\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Relationship | | {Relationship\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | {Relationship\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {Relationship\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Special needs | | Y | | | | Sy1 | | | | | | N | | | | | | | | Sn1 | | | | | | Y | | | | | | | Sy2 | | | | | | | N | | | | | | | Sn2 | | | | | | Y | | | | | | | | Sy3 | | | | | | N | | | | | | | Sn3 | | | | | | | |
| Details | | {Details\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | {Details\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {Details\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| {Details2\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | {Details2\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {Details2\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| {Details3\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | {Details3\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {Details3\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Support to age | | {Supporttoage\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | {Supporttoage\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {Supporttoage\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| School Name | | {SchoolName\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | {SchoolName\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {SchoolName\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| School Year Level | | {SchoolYearLevel\_D1} | | | | | | | | | | | | | | | | | | | | | | | | {SchoolYearLevel\_D2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {SchoolYearLevel\_D3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Estimated Cost of Schooling | | {EstimatedCostofSchooling\_Dependant1} | | | | | | | | | | | | | | | | | | | | | | | | {EstimatedCostofSchooling\_Dependant2} | | | | | | | | | | | | | | | | | | | | | | | | | | | {EstimatedCostofSchooling\_Dependant3} | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Austudy Status | | Not claiming | | | | | | | | | | | | | | | | | | A1 | | | | | | Not claiming | | | | | | | | | | | | | | | | | | | | | A2 | | | | | | Not claiming | | | | | | | | | | | | | | | | | | | | | | | A3 | | | | | |
| Home | | | | | | | | | | | | | | | | | | A4 | | | | | | Home | | | | | | | | | | | | | | | | | | | | | A5 | | | | | | Home | | | | | | | | | | | | | | | | | | | | | | | A6 | | | | | |
| Away from home | | | | | | | | | | | | | | | | | | A7 | | | | | | Away from home | | | | | | | | | | | | | | | | | | | | | A8 | | | | | | Away from home | | | | | | | | | | | | | | | | | | | | | | | A9 | | | | | |
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| **Client’s parents** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| {ClientsParents} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **File Notes** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Age, support provided, comments  {FileNotesClientsParents\_FileName} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Special Interests** | | | | |
|  | **Client 1** | | **Client 2** | |
| Eg (Collectables, Golf, Tennis) | {EgCollectablesGolfTennis\_Client1} | | {EgCollectablesGolfTennis\_Client2} | |
| {EgCollectablesGolfTennis2\_Client1} | | {EgCollectablesGolfTennis2\_Client2} | |
| {EgCollectablesGolfTennis3\_Client1} | | {EgCollectablesGolfTennis3\_Client2} | |
|  | | | | |
| **Business Advisers** | | | | |
|  | **Accountant** | **Banker** | | **Lawyer** |
| Business name | {Businessname\_A} | {Businessname\_B} | | {Businessname\_L} |
| Contact name | {Contactname\_A} | {Contactname\_B} | | {Contactname\_L} |
| Postal address | {Postaladdress\_A} | {Postaladdress\_B} | | {Postaladdress\_L} |
|  | {Postaladdress2\_A} | {Postaladdress2\_B} | | {Postaladdress2\_L} |
|  | State: {PostalAdS\_A} | State: {PostalAdS\_B} | | State: {PostalAdS\_L} |
|  | Postcode: {PostalAdP\_A} | Postcode {PostalAdP\_B} | | Postcode {PostalAdP\_L} |
| Email address | {Emailaddress\_A} | {Emailaddress\_B} | | {Emailaddress\_L} |
| Phone number | {Phoneaddress\_A} | {Phoneaddress\_B} | | {Phoneaddress\_L} |
| Fax number | {Faxnumber\_A} | {Faxnumber\_B} | | {Faxnumber\_L} |

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| **File Notes** | | | | |
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| SECTION B – FINANCIAL SUMMARY | | | | |
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| **Employment Details** | | | | |
|  | **Client 1** | | **Client 2** | |
| Work status | Fully employed | W1 | Fully employed | Q1 |
| Part time employed | W2 | Self employed | Q2 |
| Home duties | W3 | Home duties | Q3 |
| Self employed | W4 | Part time employed | Q4 |
| Unemployed | W5 | Unemployed | Q5 |
| Early Retirement | W6 | Early Retirement | Q6 |
| Retired | W7 | Retired | Q7 |
| Student | W8 | Student | Q8 |
| Unknown | W9 | Unknown | Q9 |
| Employer | {Employer\_Client1} | | {Employer\_Client2} | |
| Employer address | {Employeraddress\_Client1} | | {Employeraddress\_Client2} | |
| Occupation | {Occupation\_Client1} | | {Occupation\_Client2} | |
| Number of years’ service | {Numberofyearsservice\_Client1} | | {Numberofyearsservice\_Client2} | |
| *(Intended)* Retirement date | {IntendedRetirementdate\_Client1} | | {IntendedRetirementdate\_Client2} | |
| Do you expect employment income to change within the next 12 months? | {Doyouexpectemployment\_Client1} | | {Doyouexpectemployment\_Client2} | |
|  | | | | |
| **Salary & Other Income** | | | | |
|  | **Client 1** | | **Client 2** | |
| Salary income  *(please supply a recent payslip &*  *most current tax return)* | {Salaryincome\_Client1} | | {Salaryincome\_Client2} | |
| Other taxable income | {Othertaxableincome\_Client1} | | {Othertaxableincome\_Client2} | |
| Tax free income | {Taxfreeincome\_Client1} | | {Taxfreeincome\_Client2} | |
| Family allowance | {Familyallowance\_Client1} | | {Familyallowance\_Client2} | |
| Directors fees / gratuities | {Directorsfeesgratuities\_C1} | | {Directorsfeesgratuities\_C2} | |
| Are you expecting funds from estate or inheritance in the future? | {Areyouexpectingfunds1\_Client1} | | {Areyouexpectingfunds1\_Client2} | |
| {Areyouexpectingfunds2\_Client1} | | {Areyouexpectingfunds2\_Client2} | |
| {Areyouexpectingfunds3\_Client1} | | {Areyouexpectingfunds3\_Client2} | |
| Other | {Other1\_Client1} | | {Other1\_Client2} | |
| {Other2\_Client1} | | {Other2\_Client2} | |
| {Other3\_Client1} | | {Other3\_Client2} | |

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| **Salary Sacrifice / Package** | | |
|  | **Client 1** | **Client 2** |
| Employment super contribution rate  *(e.g. 9.5%)* | {Employmentsuper\_Client1} | {Employmentsuper\_Client2} |
| Salary sacrifice to super | {Salarysacrificetosuper\_Client1} | {Salarysacrificetosuper\_Client2} |
| Packaged motor vehicle  *(provide paperwork)* | {Packagedmotorvehicle\_Client1} | {Packagedmotorvehicle\_Client2} |
| Bonus | {Bonus\_Client1} | {Bonus\_Client2} |
| Other *(eg shares)* | {Other\_Client1} | {Other\_Client2} |
| *The following section is only relevant if you are currently in receipt of a Centrelink Pension or Benefit.* | | |
| **Centrelink** | | |
|  | **Client 1** | **Client 2** |
| Entitlement amount | {Entitlementamount\_Client1} | {Entitlementamount\_Client2} |
| Entitlement type | {Entitlementtype\_Client1} | {Entitlementtype\_Client2} |
| Centrelink reference no. (CRN) | {CentrelinkreferencenoCRN\_C1} | {CentrelinkreferencenoCRN\_C2} |
| Maintenance income | {Maintenanceincome\_Client1} | {Maintenanceincome\_Client2} |
| Maintenance payment | {Maintenancepayment\_Client1} | {Maintenancepayment\_Client2} |
| Overseas social security income  *(eg New Zealand pension)* | {Overseassocialsecurityi\_C1} | {Overseassocialsecurityi\_C2} |
| *Please provide a recent Centrelink benefit payment letter* | | |
| **File Notes** | | |
| {FileNotesCentrelink\_FileName} | | |
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| **Cost of living** | | | | | | |
| *If you would prefer to provide a summary instead of the* ***Cost of Living*** *and tax deductible items table below, please go to* ***Summary of Expenses*** *on page 9.* | | | | | | |
| **Personal** | | | | | | |
|  | **Fortnight** | **Month** | **Quarter** | **Half-year** | **Annual** | **Total last year** |
| Food/liquids | {Foodliq\_F} | {Foodliq\_M} | {Foodliq\_Q} | {Foodliq\_H} | {Foodliq\_A} | {Foodliq\_T} |
| Alcohol | {Alcohol\_F} | {Alcohol\_M} | {Alcohol\_Q} | {Alcohol\_M} | {Alcohol\_A} | {Alcohol\_T} |
| Tobacco | {Tobacco\_F} | {Tobacco\_M} | {Tobacco\_Q} | {Tobacco\_M} | {Tobacco\_A} | {Tobacco\_T} |
| Clothing/footwear | {Cfootw\_F} | {Cfootw\_M} | {Cfootw\_Q} | {Cfootw\_M} | {Cfootw\_A} | {Cfootw\_T} |
| Medical/health | {Medich\_F} | {Medich\_M} | {Medich\_Q} | {Medich\_M} | {Medich\_A} | {Medich\_T} |
| Recreation | {Recrea\_F} | {Recrea\_M} | {Recrea\_Q} | {Recrea\_M} | {Recrea\_A} | {Recrea\_T} |
| Personal care | {Person\_F} | {Person\_M} | {Person\_Q} | {Person\_M} | {Person\_A} | {Person\_T} |
| Phone & post | {PhoneP\_F} | {PhoneP\_M} | {PhoneP\_Q} | {PhoneP\_M} | {PhoneP\_A} | {PhoneP\_T} |
| Travel | {Travel\_F} | {Travel\_M} | {Travel\_Q} | {Travel\_M} | {Travel\_A} | {Travel\_T} |
| Gifts | {Gifts\_F} | {Gifts\_M} | {Gifts\_Q} | {Gifts\_M} | {Gifts\_A} | {Gifts\_T} |
| Other | {Other\_Fo} | {Other\_Mo} | {Other\_Qu} | {Other\_Ha} | {Other\_An} | {Other\_To} |
| **Housing** | | | | | | |
| Rates & insurance | {Rurnce\_F} | {Rurnce\_M} | {Rurnce\_Q} | {Rurnce\_H} | {Rurnce\_A} | {Rurnce\_T} |
| Repairs/maintenance | {Repair\_F} | {Repair\_M} | {Repair\_Q} | {Repair\_H} | {Repair\_A} | {Repair\_T} |
| Electricity & gas | {Electr\_F} | {Electr\_M} | {Electr\_Q} | {Electr\_H} | {Electr\_A} | {Electr\_T} |
| House loan (principal) | {Houselo\_F} | {Houselo\_M} | {Houselo\_Q} | {Houselo\_H} | {Houselo\_A} | {Houselo\_T} |
| Rent/mortgage | {Rentmo\_F} | {Rentmo\_M} | {Rentmo\_Q} | {Rentmo\_H} | {Rentmo\_A} | {Rentmo\_T} |
| Extra mortgage payments | {Extram\_F} | {Extram\_M} | {Extram\_Q} | {Extram\_H} | {Extram\_A} | {Extram\_T} |
| Furnishing/equipment | {Furni\_F} | {Furni\_M} | {Furni\_Q} | {Furni\_H} | {Furni\_A} | {Furni\_T} |
| Other | {OtherH\_F} | {OtherH\_M} | {OtherH\_Q} | {OtherH\_H} | {OtherH\_A} | {OtherH\_T} |
| **Transport** | | | | | | |
| Registration/insurance | {Registr\_F} | {Registr\_M} | {Registr\_Q} | {Registr\_H} | {Registr\_A} | {Registr\_T} |
| Repairs/maintenance | {RepaiT\_F} | {RepaiT\_M} | {RepaiT\_Q} | {RepaiT\_H} | {RepaiT\_A} | {RepaiT\_T} |
| Fuel & Oil | {FuelOil\_F} | {FuelOil\_M} | {FuelOil\_Q} | {FuelOil\_H} | {FuelOil\_A} | {FuelOil\_T} |
| Replacement vehicle | {ReplaV\_F} | {ReplaV\_M} | {ReplaV\_Q} | {ReplaV\_H} | {ReplaV\_A} | {ReplaV\_T} |
| Fares | {Fares\_F} | {Fares\_M} | {Fares\_Q} | {Fares\_H} | {Fares\_A} | {Fares\_T} |
| Other | {OtherT\_F} | {OtherT\_M} | {OtherT\_Q} | {OtherT\_H} | {OtherT\_A} | {OtherT\_T} |
| **General** | | | | | | |
| Super/life insurance | {Superl\_F} | {Superl\_M} | {Superl\_Q} | {Superl\_H} | {Superl\_A} | {Superl\_T} |
| Loan/savings | {Loans\_F} | {Loans\_M} | {Loans\_Q} | {Loans\_H} | {Loans\_A} | {Loans\_T} |
| Car loan | {Carlo\_F} | {Carlo\_M} | {Carlo\_Q} | {Carlo\_H} | {Carlo\_A} | {Carlo\_T} |
| Other | {OtherG\_F} | {OtherG\_M} | {OtherG\_Q} | {OtherG\_H} | {OtherG\_A} | {OtherG\_T} |
| **Children** | | | | | | |
| Food/liquid | {Foodli\_F} | {Foodli\_M} | {Foodli\_Q} | {Foodli\_H} | {Foodli\_A} | {Foodli\_T} |
| Clothing/footwear | {ClotfC\_F} | {ClotfC\_M} | {ClotfC\_Q} | {ClotfC\_H} | {ClotfC\_A} | {ClotfC\_T} |
| Education | {Educat\_F} | {Educat\_M} | {Educat\_Q} | {Educat\_H} | {Educat\_A} | {Educat\_T} |
| Other | {OtherC\_F} | {OtherC\_M} | {OtherC\_Q} | {OtherC\_H} | {OtherC\_A} | {OtherC\_T} |
| **TOTAL** | **{**Total\_F**}** | **{**Total\_M**}** | **{**Total\_Q**}** | **{**Total\_H**}** | **{**Total\_A**}** | **{**Total\_T**}** |

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| **Summary of Expenses** | | | | | | |
| **Expenditure item** | | **Description** | | | **Amount ($) p.a** | |
| Personal | |  | | |  | |
| Housing | |  | | |  | |
| Transport | |  | | |  | |
| General | |  | | |  | |
| Children | |  | | |  | |
| Other | |  | | |  | |
| Tax deductible items | |  | | |  | |
|  | | | | | | |
| **Savings** | | | | | | |
| How much do you save regularly? | |  | | |  | |
|  | | | | | | |
| **Bank Account Details** | | | | | | |
| Owner |  | |  |  |  |  |
| BSB number |  | |  |  |  |  |
| Account number |  | |  |  |  |  |
| Account name |  | |  |  |  |  |
| Bank |  | |  |  |  |  |
| Branch address |  | |  |  |  |  |
| Balance ($) |  | |  |  |  |  |
| *Please provide recent copies of your bank statements* | | | | | | |
| **Tax deductible items** | | **Description** | | | **Amount ($) p.a** | |
| Professional texts/journals | |  | | |  | |
| Other | |  | | |  | |
|  | | | | | | |
| **Personal Assets** | | **Description** *(eg: property type)* | | | **Current value** | **Owner** Eg client 1, client 2, joint |
| Family home | |  | | |  |  |
| Family/personal contents | |  | | |  |  |
| Motor vehicle 1 | |  | | |  |  |
| Motor vehicle 2 | |  | | |  |  |
| Holiday home | |  | | |  |  |
| Boat | |  | | |  |  |
| Caravan | |  | | |  |  |
| Other | |  | | |  |  |
| **Investment Assets** | | | | | | |
| **Description eg:**   * *Bank accounts* * *Term deposits* * *Property* * *Shares* * *Managed funds* * *Insurance bonds* * *Jewellery (if significant)* * *Art / Antiques / Collectables* | | | | **Current value ($)** | **Estimated income ($) dividends, rental etc** | **Owner** client 1, client 2, Joint |
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| *Please provide cost base details, holding statements etc. for all investment assets* | | | | | | |
| **File Notes** | | | | | | |
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| **Liabilities** | | | | | | | | | | |
|  | **O/S Balance**  ($) | **Interest rate**  (%) | | **Term years**  Initial/Remaining | | **Lender** | **Payment per mth / yr**  ($)  Required/Actual | | **Loan type**  Interest only / Principal + Interest | **Borrower**  Client 1 / client 2 / Joint |
| Personal loans |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Credit card 1 |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Credit card 2 |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| House mortgage |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Motor vehicle loan |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| HELP / Education loans |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Family loans |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Provisional tax |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
|  |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
|  |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Do you have an existing line of credit? | | | | | | | | | | |

*Please provide current statements for all loans*

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| **Tax deductible liabilities** | | | | | | | | | | |
|  | **O/S Balance**  ($) | **Interest rate**  (%) | | **Term years**  Initial/Remaining | | **Lender** | **Payment per mth / yr**  ($)  Required/Actual | | **Loan type**  Interest only / Principal + Interest | **Borrower**  Client 1 / client 2 / Joint |
| Overdraft |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Investment loan |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Business loans |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
| Other |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
|  |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |
|  |  | % | F🗌 V🗌 |  |  |  |  |  |  |  |

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| **Superannuation accumulation** | | | | |
| Description/fund name |  |  | |  |
| Owner |  |  | |  |
| Investor number |  |  | |  |
| Date of purchase |  |  | |  |
| Current value |  |  | |  |
| Asset to be retained *(yes/no)* |  |  | |  |
| Contributions *(yes/no)* |  |  | |  |
| Contribution amount |  |  | |  |
| Frequency |  |  | |  |
|  | | | | |
| **Self-managed Superannuation Fund** | | | | |
| Description/fund name |  |  | |  |
| Trustees *(if individual)* |  |  | |  |
| Corporate Trustee *(if applicable)* |  |  | |  |
| ABN / TFN / ACN |  |  | |  |
| Member status |  |  | |  |
| Account balance |  |  | |  |
| Account administration |  |  | |  |
| Contributions *(yes/no)* |  |  | |  |
| Contribution amount |  |  | |  |
| Frequency |  |  | |  |
|  | | | | |
| **Superannuation Pension** | | | | |
| Description/fund name |  | |  |  |
| Owner |  | |  |  |
| Investor number |  | |  |  |
| Pension type  *(eg Account based, transition to retirement)* |  | |  |  |
| Current account value ($) |  | |  |  |
| Income per annum ($) |  | |  |  |
|  | | | | |
| **Annuities & Pensions** | | | | |
| Description/fund name |  | |  |  |
| Owner |  | |  |  |
| Pension / Annuity type |  | |  |  |
| Investor number |  | |  |  |
| Current value |  | |  |  |
| Income $ pa |  | |  |  |
| *Please provide recent copies of your member statements* | | | | |

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| **Business – Name and Type of Entity** | | | |
| Revenue ($) |  |  |  |
| Profit ($) |  |  |  |
| Debt ($) |  |  |  |
| Other |  |  |  |
|  |  |  |  |

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| **Business** | |
| Business progress? |  |
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| Goals when started business? |  |
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| Is this what you thought running your own business would be like? |  |
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| Other, including file notes: |  |
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| SECTION C – OTHER TAXATION STRUCTURES | | | | | | | |
|  | | | | | | | |
| **Control or stake in business or tax structure?** | | | | | | | |
|  | Structure name | Details (e.g. directors, trustees, shareholders, beneficiaries, appointer) | ABN | TFN | ACN  (if applicable) | Active business or passive investment? | Client 1 / client 2 / Joint |
| Sole trader |  |  |  |  |  | Active 🗌 / Passive 🗌 |  |
| Partnership |  |  |  |  |  | Active 🗌 / Passive 🗌 |  |
| Private company |  |  |  |  |  | Active 🗌 / Passive 🗌 |  |
| Family trust |  |  |  |  |  | Active 🗌 / Passive 🗌 |  |
| Unit trust |  |  |  |  |  | Active 🗌 / Passive 🗌 |  |
|  |  |  |  |  |  | Active 🗌 / Passive 🗌 |  |
|  |  |  |  |  |  | Active 🗌 / Passive 🗌 |  |
| *Please provide the most recent financial statements / tax returns for each structure.* | | | | | | | |
| **STRUCTURE DIAGRAM & FILE NOTES** | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SECTION D – ESTATE PLANNING | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **Will/s** | | | **Client 1** | | | | | | | **Client 2** | | | | | |
| Do you have a Will? | | | Yes | □ | No | | | □ | | Yes | | □ | No | | □ |
| Does it reflect your current wishes? | | | Yes | □ | No | | | □ | | Yes | | □ | No | | □ |
| Original date | | |  | | | | | | |  | | | | | |
| Review date | | |  | | | | | | |  | | | | | |
| Location | | |  | | | | | | |  | | | | | |
| Executor/s | | |  | | | | | | |  | | | | | |
| Guardian | | |  | | | | | | |  | | | | | |
| Does your Will offer beneficiaries the option of using a testamentary trust? | | | Yes | □ | No | | | □ | | Yes | | □ | No | | □ |
|  | | | | | | | | | | | | | | | |
| **Power of Attorney** | | | **Client 1** | | | | | | | **Client 2** | | | | | |
| Power of attorney (granted) | | | Yes | □ | No | | | □ | | Yes | | □ | No | | □ |
| Type | | | Full | □ | | | | | | Full | | □ | | | |
| Limited | □ | | | | | | Limited | | □ | | | |
| Enduring | □ | | | | | | Enduring | | □ | | | |
| Medical | □ | | | | | | Medical | | □ | | | |
| Name | | |  | | | | | | |  | | | | | |
| Details | | |  | | | | | | |  | | | | | |
| Date signed | | |  | | | | | | |  | | | | | |
| Expires | | |  | | | | | | |  | | | | | |
| Location | | |  | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | |
| Do you have a funeral plan? | | |  | | | | | | |  | | | | | |
| Have you been married before? | | |  | | | | | | |  | | | | | |
| Details of children from previous marriages / relationships?  *(names & ages)* | | |  | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | |
| **Which of the following statements most closely matches your assessment of the adequacy and currency of your own family wealth strategy?** | | | | | | | | | | | | | | | |
|  | Comprehensive, current and properly documented. Understood by all interested parties. | | | | | | | | | | | | | | |
|  | Broad strategy developed in the past, but not certain that all recent rule changes and current planning opportunities fully taken into account. Personal and family circumstances changed since existing plan was developed. | | | | | | | | | | | | | | |
|  | Something put in place years ago and gathering dust somewhere. Probably need major update but not sure how to proceed? | | | | | | | | | | | | | | |
|  | No real plan at all. Others can sort out the mess when I’m gone. | | | | | | | | | | | | | | |
| SECTION E – INSURANCE | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **Life, Trauma, Total and Permanent Disability (TPD), Income Protection** | | **Policy 1** | | | | | **Policy 2** | | | | | **Policy 3** | | | |
| Type of policy | |  | | | | |  | | | | |  | | | |
| Policy owner | |  | | | | |  | | | | |  | | | |
| Company | |  | | | | |  | | | | |  | | | |
| Policy number | |  | | | | |  | | | | |  | | | |
| Renewal date | |  | | | | |  | | | | |  | | | |
| Life insured | |  | | | | |  | | | | |  | | | |
| Date commenced | |  | | | | |  | | | | |  | | | |
| Amount of cover ($) | |  | | | | |  | | | | |  | | | |
| Annual premium ($) | |  | | | | |  | | | | |  | | | |
| Payment frequency | |  | | | | |  | | | | |  | | | |
| Premium type *(stepped or level)* | |  | | | | |  | | | | |  | | | |
|  | | | | | | | | | | | | | | | |
| **General Insurance** | | **Policy 1** | | | | | **Policy 2** | | | | | **Policy 3** | | | |
| Type of policy | |  | | | | |  | | | | |  | | | |
| Policy owner | |  | | | | |  | | | | |  | | | |
| Company | |  | | | | |  | | | | |  | | | |
| Policy number | |  | | | | |  | | | | |  | | | |
| Renewal date | |  | | | | |  | | | | |  | | | |
| Indexed to CPI *(yes/no)* | |  | | | | |  | | | | |  | | | |
| Sum insured ($) | |  | | | | |  | | | | |  | | | |
| Annual premium ($) | |  | | | | |  | | | | |  | | | |
| Payment frequency | |  | | | | |  | | | | |  | | | |
|  | | | | | | | | | | | | | | | |
| **When was your last insurance review?** | | | | | | **Would you like an insurance review?** | | | | | | | | | |
|  | | | | | | Yes | | | □ | | No | | | □ | |
|  | | | | | | | | | | | | | | | |
| **File Notes**  *Detail here any medical conditions that may be of importance to Insurance Planning (eg heart disease, diabetes)* | | | | | | | | | | | | | | | |
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| SECTION F – FINANCIAL PLANNING OBJECTIVES | | | | | | |
| Your financial plan should take into consideration factors that are considered important to you. To assist designing your financial plan, please rate the following objectives in their order of importance to you. Rate each item in order of priority by placing a circle around the relevant number.  Please rank as: 1 = not important, 2 = slightly important, 3 = important, 4 = very important. | | | | | | |
| **Objective** | | | **Priority** | | | |
| Protecting family/assets in the event of death | | | 1 | 2 | 3 | 4 |
| Protecting current income in the event of sickness or accident | | | 1 | 2 | 3 | 4 |
| Protecting family/assets in the event of serious illness or trauma | | | 1 | 2 | 3 | 4 |
| Maintaining current standard of living if permanently disabled | | | 1 | 2 | 3 | 4 |
| Paying off mortgage | | | 1 | 2 | 3 | 4 |
| Planning for retirement | | | 1 | 2 | 3 | 4 |
| Maximising social security entitlements | | | 1 | 2 | 3 | 4 |
| Ease of portfolio management | | | 1 | 2 | 3 | 4 |
| Generate income from investments | | | 1 | 2 | 3 | 4 |
| Generate capital growth from investments | | | 1 | 2 | 3 | 4 |
| Tax minimisation | | | 1 | 2 | 3 | 4 |
|  | | | | | | |
| **Major future expenses**  *Detail here all planned future lump sum expenses over the next five years.* | | | | | | |
| **Item** | **Amount ($)** | **Estimated year of expense** | | | | |
| Holidays |  |  | | | | |
| New car/car upgrade |  |  | | | | |
| Home improvements |  |  | | | | |
| Gifts |  |  | | | | |
| Education |  |  | | | | |
| Wedding |  |  | | | | |
| Debt repayment 1 |  |  | | | | |
| Debt repayment 2 |  |  | | | | |
| Other |  |  | | | | |
|  |  |  | | | | |
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| *The following objectives have been listed to assist you in identifying your goals.*  *Please complete details for any objectives that are relevant.* | | | |
| **Wealth creation and accumulation** | **Timeline** | **Cost** / **%Increase** / **Deposit** | **Priority** |
| Increase standard of living |  |  |  |
| Buy a house  *(include cost & required deposit)* |  |  |  |
| Buy an investment property  *(include cost & required deposit)* |  |  |  |
| Start a business  *(include start up capital required)* |  |  |  |
| **Lifestyle expenditure & debt management** | | | |
| Pay off the mortgage |  |  |  |
| Reduce/pay off personal loans/credit card |  |  |  |
| Pay children’s education expenses *(primary/secondary/tertiary)* |  |  |  |
| Buy new car/boat/holiday house |  |  |  |
| Travel/holidays |  |  |  |
| Other |  |  |  |
|  |  |  |  |
| **Tax management/Centrelink** | | | |
| Reduce tax payable this/next financial year |  |  |  |
| Minimise tax as much as possible |  |  |  |
| Plan for future Centrelink benefits |  |  |  |
| Pay no/little tax in retirement |  |  |  |
| Other |  |  |  |
| **Estate planning** | | | |
| Organise my/our estate with Enduring/Powers of Attorney/Binding Death Nominations/Testamentary Trust |  |  |  |
| Other |  |  |  |
| **Managing your investments** | | | |
| Create a self-managed superfund |  |  |  |
| Financial coaching/attend seminars |  |  |  |
| Utilise a financial Adviser to manage our portfolio/superannuation |  |  |  |
| Other |  |  |  |
|  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Retirement** | | | | | |
| Early retirement *(e.g. before 60)* | |  |  | |  |
| Retirement *(without reliance on age pension)* | |  |  | |  |
| Later retirement at higher standard of living | |  |  | |  |
| Require lump sum at retirement  *(holiday, caravan, new house)* | |  |  | |  |
| Increase my/our superannuation | |  |  | |  |
| Other | |  |  | |  |
|  | |  |  | |  |
|  | | | | | |
| **Objectives / motivation** | | | | | |
|  | **Client 1** | | | **Client 2** | |
| 3 years from now, what would need to have happened...   * Personally * Professionally * Financially   For you to be delighted with your progress? |  | | |  | |
|  | | |  | |
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|  | | |  | |
| Earnings goal in retirement | $ | | | $ | |
| Do you intend to scale back hours prior to retirement? |  | | |  | |
|  | | | | | |
| **Of the issues we have discussed, what is/are the highest priority for you? FILE NOTES**  *Detail here the main reason for seeking financial advice* | | | | | |
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| **Problems in the way** | | |
|  | **Client 1** | **Client 2** |
| Size of problem |  |  |
|  |  |
|  |  |
|  |  |
| Overdraft  Cash  Credit |  |  |
|  |  |
|  |  |
|  |  |
| Time issues |  |  |
|  |  |
|  |  |
|  |  |
| People issues |  |  |
|  |  |
|  |  |
|  |  |
| **Consequences** | | |
|  | **Client 1** | **Client 2** |
| What are the consequences of not doing this? |  |  |
|  |  |
|  |  |
|  |  |
| Where are you now on a scale of 1-10 regarding taking action on the matters we have discussed? |  |  |
|  |  |
|  |  |
|  |  |
| On the basis that you accept our proposal to help you with these issues, when would be an appropriate time to get started? |  |  |
|  |  |
|  |  |

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| --- | --- | --- | --- | --- | --- |
| SECTION G – PERSONAL INVESTMENT PREFERENCES | | | | | |
| **YOUR ATTITUDE TO INVESTING**  This Questionnaire aims to uncover your attitude to investing, your understanding of financial markets and how you may react during certain investment market and economic conditions. Financial planning is a long-term process, and many investments that can be used to help achieve long-term financial goals are also long-term in nature. However, while long-term growth is generally achieved, it may come with periods of negative returns. To ensure your financial goals are reached, generally you must remain invested true to your financial plan during these periods. The following questions help us to understand your tolerance for financial risk. The information gives us an overall understanding of your investment profile and helps us to understand what investment mix and products will be appropriate, or inappropriate, in helping to achieve your financial goals.  **RISK PROFILE** | | | | | |
| 1. **Assuming you have an amount of money to invest, how would you invest it?** | | | **Client 1** | **Client 2** | **Points** |
| 1. In a secure investment where there is no risk of capital loss | | |  |  | 10 |
| 1. In an investment that produces the income I require with minimal risk of capital reduction | | |  |  | 20 |
| 1. In an investment which may fluctuate in value in the short term but with potential for higher returns in the long term | | |  |  | 30 |
| 1. In a higher risk investment that will receive the maximum return | | |  |  | 40 |
|  | | | | | |
| 1. **With regard to your attitude to tax, what level of taxation are you prepared to accept in order to meet your goals?** | | | **Client 1** | **Client 2** | **Points** |
| 1. I am not interested in tax savings if my capital will be put at risk | | |  |  | 10 |
| 1. I would prefer stable, reliable capital value and returns with some possible tax savings | | |  |  | 20 |
| 1. I can accept a small reduction in value from time to time, in exchange for a tax-advantaged income | | |  |  | 30 |
| 1. My aim is to minimise tax and I am prepared to risk my capital to achieve this aim | | |  |  | 40 |
|  | | | | | |
| 1. **Have you ever invested in shares, government bonds or managed funds before?** | | | **Client 1** | **Client 2** | **Points** |
| 1. No, I am not comfortable with the risks involved | | |  |  | 10 |
| 1. No, but I am comfortable with the risks involved in order to get a higher return | | |  |  | 20 |
| 1. Yes, but I feel uncomfortable with the price movements of the investments | | |  |  | 30 |
| 1. Yes, and I feel comfortable with the price movements | | |  |  | 40 |
|  | | | | | |
| 1. **How would you react if your long-term investments declined by 10% in one year?** | | | **Client 1** | **Client 2** | **Points** |
| 1. I can’t accept any decline in the value of my investments | | |  |  | 10 |
| 1. If the income I received didn’t change, I would not be too concerned about my capital declining in the short term | | |  |  | 20 |
| 1. I generally invest for the long term, but would be concerned with this decline | | |  |  | 30 |
| 1. I invest for the long term and would accept these fluctuations due to short term market influences | | |  |  | 40 |
|  | | | | | |
| 1. **Which statement is most like you?** | | | **Client 1** | **Client 2** | **Points** |
| 1. I want investments with a low degree of risk | | |  |  | 10 |
| 1. Most of my portfolio should be invested in low risk investments. I would also place a small amount of my capital in higher risk investments that may give better returns | | |  |  | 20 |
| 1. I prefer a spread of investments in a balanced portfolio | | |  |  | 30 |
| 1. I would invest the majority of my portfolio in higher risk investments but have some low risk investments as well | | |  |  | 40 |
| 1. I like higher risk investments that will produce high long-term returns | | |  |  | 50 |
| **TOTALS TO BE CARRIED OVER TO NEXT PAGE** | | |  |  |  |
| 1. **A series of graphs appear below. Which one reflects the level of volatility that you are prepared to accept?** | | | | | |
|  | | | | | |
| 40 points | | 30 points | | | |
|  | |  | | | |
|  | |  | | | |
| 20 points | | 10 points | | | |
|  | | | | | |
| 1. **In the past, how would you describe your overall investment decisions?** | | | **Client 1** | **Client 2** | **Points** |
| 1. Not applicable. I am a first time investor or have only ever invested via my superannuation fund | | |  |  | 0 |
| 1. Good, I have stuck to stable and safe investments | | |  |  | 20 |
| 1. I’ve had some losses and am reluctant to invest in anything that fluctuates in value | | |  |  | 10 |
| 1. Fair, however I would like to improve my returns | | |  |  | 30 |
| 1. I’ve had some losses, but am willing to give it another go | | |  |  | 40 |
| 1. Good, I have been rewarded for making investments that have increased in value | | |  |  | 50 |
|  | | | | | |
| 1. **Which of the following best describes your understanding of the investment market?** | | | **Client 1** | **Client 2** | **Points** |
| 1. I am an experienced investor and have had exposure to various asset classes and am fully aware of the risks involved | | |  |  | 30 |
| 1. My awareness of the financial market is limited to information passed on by my broker or financial planner and I rely on the professionals to keep me updated | | |  |  | 20 |
| 1. I have little awareness of the investment market, however I have a desire to build my knowledge and understanding | | |  |  | 10 |
| 1. I’m not familiar with investments or financial markets | | |  |  | 0 |
|  | | | | | |
| 1. **Have you ever borrowed money to make an investment other than your own home (e.g. an investment property, holiday home, share portfolio or margin loan?** | | | **Client 1** | **Client 2** | **Points** |
| 1. No | | |  |  | 0 |
| 1. Yes | | |  |  | 30 |
| 1. No, but I am willing to consider it now | | |  |  | 10 |
| 1. Yes, but I’m not prepared to borrow at the moment to invest | | |  |  | 20 |
| **Totals from previous page** | | |  |  |  |
| **TOTALS** | | |  |  |  |
| **Investor Risk Profile Summary** | | | | **Total Points** | |
| **Cash**  Protection of capital or certainty of income is your only objective. You do not wish to attain higher returns if your capital is at risk. This portfolio is suitable for investors with an investment term of less than 2 years or who are seeking a guaranteed level of income for a specified time/duration. | | | | - | |
| **Conservative**  A conservative investor, to whom security of capital is paramount, and who is prepared to pay more tax and accept inflationary losses to protect assets. A conservative investor prefers a regular income stream and a high degree of stability of value in their assets, with small risk of capital loss. | | | | 50 - 110 | |
| **Moderately Conservative**  A moderately conservative investor is an investor who is conservative and wants to protect their capital. The investor is comfortable with some small short term capital risk and requires some protection from inflation. The main emphasis is on generating income with some increase in the value of their investment. | | | | 111 – 160 | |
| **Balanced**  A balanced investor is an investor who wants a balanced portfolio with a broad spread of quality investments. The investor requires an income stream and some capital growth in the medium to long term to protect assets from inflation. | | | | 161 – 260 | |
| **Growth**  A growth investor is an investor who wants to achieve medium to long-term capital growth and maintain some spread of investments across different asset classes. Provision of an income stream is less important and the portfolio is more tax effective. | | | | 261 – 310 | |
| **High Growth**  A high growth investor is more interested in capital growth and who, in wishing to accumulate more wealth more quickly, is prepared to accept higher volatility and gearing. | | | | 311 – 350 | |
|  | | | | | |
| **Your Priorities and Lifestyle Needs** | | | | | |
| In addition to understanding your tolerance to investment risks, we also need to consider your lifestyle needs and priorities in creating your investment portfolio. To help you achieve your financial needs and goals, your response to the following questions will be used to determine a suitable overall asset allocation for your investment portfolio. | | | | | |
| **INVESTMENT TIMEFRAME**  Keeping in mind your primary Financial goals, when would you need access to this money: | | | | | |
| □ | 1 year or less | | | | |
| □ | 1-3 years | | | | |
| □ | 3-7 years | | | | |
| □ | 7 years or more | | | | |
|  | | | | | |
| **LIQUIDITY REQUIREMENTS**  Please indicate your requirement to access money: | | | | | |
| □ | I always need access to the money | | | | |
| □ | I need to be able to access the money at short notice | | | | |
| □ | Some cash is required but I prefer longer term investments | | | | |
| □ | I have little/no need for short term cash, so longer term investments are acceptable | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INCOME REQUIREMENTS**  Please indicate the level of income required from your investments: | | | | | |
| □ | No current income from investments is required | | | | |
| □ | A small income requirement with a preference to capital growth | | | | |
| □ | Income is required however capital growth is important | | | | |
| □ | Substantial income is required with some capital growth | | | | |
| □ | Maximum possible income from my investments is required | | | | |
|  | | | | | |
| **CONSTRAINTS** | | | | | |
| Are there any specific investments you would not wish to consider? | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
| Are there specific investments you would wish to have included in your Financial Plan? | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
| **Your Acknowledgment** | | | | | |
| Based on the results of the risk profile questionnaire and the above responses to my/our priorities and lifestyle needs, I/we am/are comfortable with investing in line with the Investment Risk Profile below: | | | | | |
|  | | **Client 1** | | **Client 2** | |
|  | | □ | Cash | □ | Cash |
| □ | Conservative | □ | Conservative |
| □ | Mod. Conservative | □ | Mod. Conservative |
| □ | Balanced | □ | Balanced |
| □ | Growth | □ | Growth |
| □ | High Growth | □ | High Growth |
| **Client 1** | | | | **Client 2** | |
| Name | | | | Name | |
| Signature | | | | Signature | |
| Date | | | | Date | |

|  |  |
| --- | --- |
| SECTION H – ADVISER & CLIENT DECLARATIONS | |
| 1. **Adviser Declaration** 2. The preparation of your Financial Plan will be based on the above information and any other documented correspondence entered into; 3. I have provided a copy of the Financial Services Guide to you before any investment Advisory services were provided. 4. I have supplied you with a copy of the Privacy Statement of The Investment Collective. | |
| **The Investment Collective Representative** | |
| Name | |
| Signature | |
| Date | |
| 1. **Client Declaration**  * I/we advise that the information provided in this document is complete and accurate to the best of my/our knowledge; * I/we acknowledge that by not providing complete and accurate information on my personal and financial position that this may lead my adviser to provide inappropriate advice; * I/we understand that in respect of insurance recommendations that by not providing complete and accurate information that an insurance policy purchased which differs from those recommended may not be appropriate to my/our needs; * I/we advise that I/we have read and understood the Financial Services Guide and Privacy Statement before any investment Advisory services were provided  1. **Tax File Number Authorisation**  * I/we give permission for my/our tax file number to be stored in a secure format by my adviser in accordance with legislative requirements; * I/we give permission for my/our tax file number to be forwarded to financial institutions as required.  1. **Financial Services Guide**  * I/we confirm that we received a Financial Services Guide.  1. **Privacy Statement**  * I/we confirm that I/we have read and understood the Privacy Statement that is incorporated in the Financial Services Guide.  1. **Marketing Material**  * I/we would like to receive marketing material from The Investment Collective.   Please acknowledge that you have read and agree with the above declarations by signing here: | |
| **Client 1** | **Client 2** |
| Name | Name |
| Signature | Signature |
| Date | Date |
| *The Adviser may use the following form to request additional information from other institutions such as superannuation funds, insurance companies, accountants or solicitors. If the prospective client is a Centrelink customer, the consent may be used by the Adviser to access their Centrelink information online from the Confirmation eServices site.* | |

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**Customer Consent Script**

*In addition to any other information a participant requires from a customer, customer consent records must include the following:*

This consent will be used for the sole purpose of authorising Centrelink to provide information to The Investment Collective to assess your eligibility in relation to concessions or services provided by Centrelink:

Income Confirmation

I **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**authorise:

* CIP Licensing Limited T/A The Investment Collective to use Centrelink Confirmation eServices to perform a Centrelink enquiry of my customer details in order to enable the business to determine if I qualify for a financial service.
* the Australian Government Department of Human Services (the department) to provide the results of that enquiry to The Investment Collective.

I understand:

* the department will disclose personal information to The Investment Collective including my name, payment type, payment status, one off payment, income, assets, deductions, shared care arrangements and Youth Allowance Independent Rate to confirm my eligibility for relevant financial service.
* this consent, once signed, remains valid while I am a customer of The Investment Collective unless I withdraw it by contacting The Investment Collective or the department.
* I can get proof of my circumstances/details from the department and provide it to The Investment Collective so that my eligibility for relevant financial service can be determined.
* if I withdraw my consent or do not alternatively provide proof of my circumstances/details, I may not be eligible for the financial service provided by The Investment Collective.

**All highlighted fields below must be complete for this form to be valid**

|  |  |
| --- | --- |
| Signature: | Signature: |
| Name: | Name: |
| Date: | Date: |

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|  |  |  |
| --- | --- | --- |
| Client Authority to Access Information | | |
| Facsimile / Email Message | | |
| Financial Services Licence No: 471728 | ABN: 63 603 558 658 | |
| To whom it may concern,  This letter authorises The Investment Collective, **Adviser Name** and their staff to access information on any investments, superannuation, loan accounts, insurance policies, bank accounts or other financial information that we may hold from time to time, **unless authority is withdrawn in writing.**  **Nominated Staff members:**  *⬪ Demi Sanderson ⬪ Larissa Dowdle ⬪ Elizabeth Whalley ⬪ Katrina Tearle ⬪ John Zahra ⬪ Malcolm Smith ⬪*  *Hannah Smith ⬪ Sharon Pollock ⬪ Ian Maloney ⬪ Rebecca Smith ⬪ Braden Milburn* | | |
| **Client 1** | | **Client 2** |
| Full name | | Full name |
| Current address | | Current address |
|  | |  |
| Previous address (if applicable) | | Previous address (if applicable) |
|  | |  |
| Date of birth | | Date of birth |
| Telephone number | | Telephone number |
|  | | |
| Sign | | Sign |
| Date | | Date |

Yours faithfully  
Adviser name

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|  |  |
| --- | --- |
| **CHECKLIST** | |
| **Have you attached documents required and completed applicable questions?** | |
| □ | Fully completed [**Section A – Personal Details**](#SectionA)including contact details, tax file numbers and place of birth? |
| □ | Attached recent payslips to support income details in [**Section B**](#SectionB)? |
| □ | Provided full details of any **Salary Packaging Arrangement, including Salary Sacrifice** and **Superannuation**? |
| □ | Included details of **Investments, Superannuation and Self-Managed Super Funds** *(including ABN/TFN/ACN for corporate trustee if applicable*? |
| □ | Provided details of [**Cost of Living**](#Costofliving) **Expenses** on pages 8 & 9? |
| □ | Completed details of your **Assets** and **Bank Accounts** on page 9? |
| □ | Attached copies of **Dividend** or **Holding Statements** for all your shares, including HIN or SRN? |
| □ | Advised purchase date and cost for all assets such as **Investment Properties, Shares** and **Managed Funds**? |
| □ | Given us **Details of any loans**, including outstanding amount, interest rate, type of loan, purpose of loan, term and original drawdown? |
| □ | Attached your most recent **income tax returns**? |
| □ | Provided copies of your **superannuation statements** *(including member statements for self-managed funds)* |
| □ | Attached a properly executed copy of your **Family Trust** or **Superannuation Fund Trust Deeds** and any amendments and **Income Tax Returns** for the entities? |
| □ | Given us details of any **business** you are involved in, including **profit and loss statement** and **balance sheet**? |
| □ | Completed your [**Financial Planning Objectives**](#SectionF)on page 17? |
| □ | Filled out the [**Risk Profile Questionnaire**](#SectionG) on pages 21 & 22, including signature on page 24? |
| □ | Signed and dated the [**Client Declaration**](#SectionH) on page 25? |
| □ | Signed and dated the [**Client Authority to Access Information**](#Clientauthority) on page 29? |
| □ | Provided acceptable **Identification Documents** that allow your Adviser to verify your full name and either your date of birth or your residential address as required under the Anti-Money Laundering and Counter-Terrorism Financing Act? |
| □ | Signed and dated the Customer Consent Script on page 28 if you are a Centrelink Customer? |