

Authority for TelstraSuper Financial Planning to release information



About this form

Complete this form to authorise Telstra Super Financial Planning Pty Ltd (**TSFP**) to discuss your financial affairs in the context of financial advice that you have received from TSFP with your tax adviser, accountant, solicitor or other professional adviser.

The authorised person will not be able to change any of your personal details, give any instructions to TSFP or carry out any transactions on your TelstraSuper account on your behalf.

This authority will remain in effect for a period of two years from the date this form is signed or until your death, whichever is earlier.

You can revoke the authority at any time by completing the **Revoking a Third Party Authority** form. The revocation will take effect on the date that the form is processed by TSFP. This authority is also revoked upon your death.

If you have any questions, please contact us on **1300 877 526**.

Please note: This authority does not allow TelstraSuper to release information about your TelstraSuper account. To authorise TelstraSuper to release your account details to another person, including your financial adviser, you will need to complete an **Authority for TelstraSuper to release information** form.

A

Your details

Title Mr Mrs Miss Ms Other

Surname TelstraSuper member number

Given name(s) Date of birth

Residential Address (PO Box is not acceptable)

Suburb State Postcode

Mobile Contact phone no.

Email address

B

Authorised person's details

Name

Relationship to you (you must tick one option)

Accountant Tax adviser Financial adviser Solicitor Other, please specify

Organisation (if applicable)

Address

Suburb State Postcode

Mobile Contact phone no.

Email address

Additional details about your authorised person's organisation (if applicable)

ABN/ACN number

AFSL number

My information can be given to any person in this organisation.

My information can only be given to the the persons in the organisation listed below.

C**Member declaration and signature**

- I authorise TSFP to release information relating to financial advice I have received from TSFP to the authorised person(s) named in section B.
- I acknowledge that:
 - this authority will remain in effect for a period of two years from the date I sign this form unless revoked by me at any time before the end of the two year period by completing a **Revoking a Third Party Authority** form
 - this authority will be revoked upon my death
 - this authority will not allow the authorised person to change my personal details, give any instructions to TSFP or carry out transactions on my TelstraSuper account on my behalf
 - TSFP will not be responsible for any losses or delays resulting from providing information to my authorised person(s).
- I agree to release, discharge and indemnify TSFP from and against all actions, claims, demands, expenses and liabilities that I suffer or are suffered or brought against TSFP in respect of information released to the authorised person(s) by TSFP.
- I consent to my personal information being used in accordance with TelstraSuper Financial Planning's Privacy Policy and Privacy Collection Statement.

Name

Signature

X

Date

Please return completed form to:

Email fas@telstrasuper.com.au

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