



CHANGING/APPOINTING A FINANCIAL ADVISER

Please use black ink	
1. Account Details	Full Account Name AMM Account No / Facility ID
2. Financial Adviser Details*	Practice Name
3. Financial Adviser Identification Declaration	Declaration I declare that I have obtained the identification records of the above Applicant(s) and carried out the appropriate verification procedures in accordance with the FSC Industry Guidance Note and am reasonably satisfied as to the identity of the Applicant. Copies of the identification records are held in the files of the applicant maintained by myself. Financial Adviser Signature Date

* Financial Adviser not registered with AMM?

If you are not currently registered with AMM, please provide your details on the AMM 'Register' website page which is accessed via the AMM Home Page or going directly to: https:// moneymarket.com.au/adviser_registration. Please note, the verification process will take 2-3 business days and we will then be in contact with your AMM Broker Code.

Web:www.moneymarket.com.auPh: 1300 306 28107 3228 2688Email: admin@moneymarket.com.au

Address: Level 9, 324 Queen St, Brisbane, QLD 4000 | GPO Box 330, Brisbane, QLD 4001 Australian Moneymarket PtyLtd ABN 56 126 032 755 is a corporate authorised representative (No. 338682) of DDH Graham Limit<u>ed ABN 28 010 639 219 (AFSL No. 226319).</u> 4. Your New Financial Adviser's Authority Where you appoint your financial adviser or stockbroker as your Authorised Signatory and that financial adviser or stockbroker is a company or firm, you agree that we may accept instructions from any relevant authorised officer of the financial adviser or stockbroker.

If you are signing this form on behalf of a company or firm, you represent and warrant that you are authorised to sign this form on that company or firm's behalf.

 5. Declaration and Signature of Account Holder/s
I/We declare that the information provided in this document is true and correct and that I/we are authorised to sign this document on behalf of the account holder.
Please note this authority will automatically revoke any existing authority with another Financial Adviser or Broker.

Signature		Signature	
Name	Date	Name	Date
Individual Director	Sole Director	Individual Director	Sole
Other (please specify)		Other (please specify)	