

29 January 2024

## Family Fee Aggregation Application

Complete the following form to apply for Family Fee Aggregation across **Expand Extra products**<sup>1</sup>.

### Terms and conditions

- Each person applying to link for the purposes of Family Fee Aggregation must be a member of the same immediate family (such as spouse, son, daughter, partner, father, mother, brother, sister, grandparents and the spouses of immediate family members) including multiple accounts for the same person.
- Any new Family Fee Aggregation nomination will override any previous nomination.
- A maximum of eight accounts are allowed to be linked together for Family Fee Aggregation purposes.
- Accounts nominated for Family Fee Aggregation within the same group must be associated with the same financial adviser.
- A Family Fee Aggregation request may not be accepted and a linking can be cancelled at any time by the Trustee/Service Operator.
- Each linked account will be able to access information about the other members in the Family Fee Aggregation Group, including names, account numbers and the aggregate account balance.

Any account(s) in Expand Extra Investment can be linked for the purposes of Family Fee Aggregation, provided that either a director, trustee or joint investor has a linked account in their own name or the director, trustee or joint investor is an immediate family member with another linked account. The Trustee/Service Operator collects the information in this form for the purpose of processing the application.

Any personal information provided in this form will be handled in accordance with the Trustee/Service Operator's privacy policy, available at [myexpand.com.au/privacy](https://myexpand.com.au/privacy).

**Please ensure that each linked account holder (including yourself) completes and signs this form, and that each account holder has read and understood the terms and conditions of this form and the information in the relevant PDS or Offer Document.**

**Please complete these instructions in BLACK INK using CAPITAL LETTERS and ✓ boxes where provided.**

### Linked account

Account Name

Account number (if known)

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Relationship to group  
(such as spouse)

**Important:** Before you sign this document it is important that you read the current PDS and/or Offer Documents (available at [myexpand.com.au](https://myexpand.com.au)) and important information set out above in this Family Fee Aggregation Application.

By signing and submitting this application, you confirm that you are applying for your account(s) to be linked to other parties detailed on this form for the purpose of calculating the Administration Fee, and that the information you have disclosed in this form is true and correct.

Signature

Date

	/		/	
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Please forward all correspondence and enquiries to:

**Post:** Expand  
Reply Paid 264, Melbourne VIC 8060

**Email:** [clientfirst@myexpand.com.au](mailto:clientfirst@myexpand.com.au)

**Telephone:** 1800 517 124