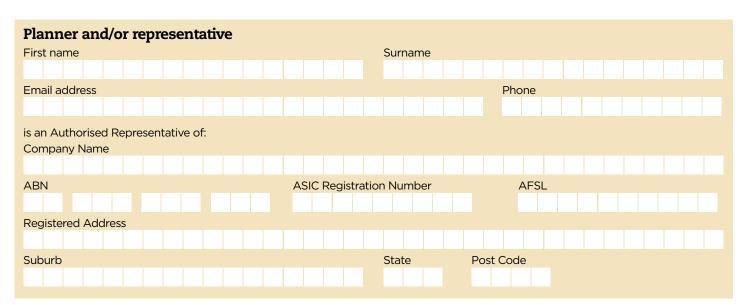
□legalsuper

Request for Adviser access to legalsuper Guaranteed Income quotation platform

Email this completed form to:

mail@legalsuper.com.au

_EGS 8430



Request to grant the person above with access to the legalsuper Guaranteed Income Account Adviser portal for the purpose of providing the (below member) with quotations.

Member	
Member's first name	Surname
Date of birth (dd/mm/yyyy)	Member number
of Address	
Town or Suburb	State Post Code

Planner or Authorised representative	
Signature	Date
IMPORTANT: This authority is valid for use until otherwise advised or expires.	

Terms and Conditions

- 1. Agree to abide by the terms and conditions of the legalsuper Guaranteed Income portal
- 2. Declare that the information in this form is correct
- 3. Acknowledge that legalsuper Guaranteed Income accounts are only available to legalsuper members