



LOCUMS GROUP

SINCE 1952

ACCOUNTANTS FINANCIAL ADVISERS MORTGAGE CENTRE

## CLIENT FACT FIND

VERSION/DATE 25 September 2020

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Adviser: \_\_\_\_\_

Referred: \_\_\_\_\_

Documents Supplied:  FSG (incl. Adviser Profile)

Client Agreement

Locumsgroup Asset Management Pty Ltd Australian Financial Services Licence No. 339567

**Important Notice to Clients:** Corporations Law requires that in order to make an investment or insurance recommendation, the adviser must have reasonable grounds for making a recommendation. This means that the adviser must conduct an appropriate investigation as to the investment objectives, financial situation and particular needs of the person concerned. The information requested in this questionnaire is necessary to enable a recommendation to be made on a reasonable basis and will be used for that purpose.

| Personal       | Client 1 | Client 2 |
|----------------|----------|----------|
| Title          |          |          |
| First Names    |          |          |
| Surname        |          |          |
| Date of Birth  |          |          |
| Place of Birth |          |          |
| Marital Status |          |          |

| Address             |  |  |
|---------------------|--|--|
| Number / Street     |  |  |
| Suburb              |  |  |
| State/Postcode      |  |  |
| Telephone: Business |  |  |
| Telephone: Home     |  |  |
| Telephone: Mobile   |  |  |
| Facsimile           |  |  |
| Email               |  |  |

| Employment                         |  |  |
|------------------------------------|--|--|
| Occupation                         |  |  |
| Employer Name                      |  |  |
| Status (employed or self-employed) |  |  |
| Salary                             |  |  |
| Bonus                              |  |  |
| Dividend                           |  |  |
| <b>Total Income</b>                |  |  |
|                                    |  |  |
| Work Address                       |  |  |
| Suburb                             |  |  |
| State / Postcode                   |  |  |
| Length of Employment               |  |  |

| Family |            |         |     |        |              |                             |
|--------|------------|---------|-----|--------|--------------|-----------------------------|
| Title  | First Name | Surname | DOB | Gender | Relationship | Financially Dependent Until |
|        |            |         |     |        |              |                             |
|        |            |         |     |        |              |                             |
|        |            |         |     |        |              |                             |
|        |            |         |     |        |              |                             |

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**L O C U M S G R O U P**

S I N C E 1 9 5 2

**STATEMENT OF ASSETS AND LIABILITIES**

|  |    |    |
|--|----|----|
| <b>ASSETS:</b>                                   |    |    |
| Main Residence                                   | \$ | \$ |
| Investment Real Estate                           | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Shares / Units                                   | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Cash   | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Superannuation                                   | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Motor Vehicles                                   | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Other Assets                                     | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| <b>TOTAL ASSETS:</b>                             |    |    |
| <b>LIABILITIES</b>                               |    |    |
| Main Residence Loan                              | \$ | \$ |
| Investment Real Estate Loan(s)                   | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Shares Loan                                      | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Overdraft / Credit Cards                         | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Superannuation                                   | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Motor Vehicle Loans                              |    |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| Other Liabilities                                | \$ |    |
|  |    |    |
| <i>Sub-total</i>                                 |    | \$ |
| <b>TOTAL LIABILITIES:</b>                        |    | \$ |
| <b>OWNERS EQUITY (ASSETS MINUS LIABILITIES):</b> |    | \$ |

|                             |          |          |
|-----------------------------|----------|----------|
| Superannuation Fund Details | Client 1 | Client 2 |
|-----------------------------|----------|----------|

**Fund 1:**

|  |  |  |
|--|--|--|
| Fund Manager   |  |  |
| Fund Type (SMSF/Public Offer/Industry Fund)            |  |  |
| Current Fund Value                                     |  |  |
| Total Contributions Per Annum (incl. Salary Sacrifice) |  |  |

**Fund 2:**

|  |  |  |
|--|--|--|
| Fund Manager   |  |  |
| Fund Type (SMSF/Public Offer/Industry Fund)            |  |  |
| Current Fund Value                                     |  |  |
| Total Contributions Per Annum (incl. Salary Sacrifice) |  |  |

**Estate Planning Details**

|  |                              |                             |                              |                             |
|--|------------------------------|-----------------------------|------------------------------|-----------------------------|
| Do you have a current Will?                | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Does the Will meet your current needs?     | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Have you allowed for a Testamentary Trust? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Who is your Executor?                      |                              |                             |                              |                             |

**Power of Attorney**

|   |                              |                             |                              |                             |
|---|------------------------------|-----------------------------|------------------------------|-----------------------------|
| Do you have a Power of Attorney arrangement in place if you are incapacitated?            | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Who is your Agent/Attorney?   |                              |                             |                              |                             |
| Are you confident that the executor of your Will could manage and administer your estate? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

**Professional Advisers**

|  |  |
|--|--|
| <b>Solicitor's Details</b>             |  |
| Name                                   |  |
| Firm                                   |  |
| Address                                |  |
| Phone / Fax Number                     |  |
| <b>Accountant's Details</b>            |  |
| Name                                   |  |
| Firm                                   |  |
| Address                                |  |
| Phone / Fax Number                     |  |
| <b>Insurance Agent / Broker (Name)</b> |  |
| Firm                                   |  |
| Address                                |  |
| Phone / Fax Number                     |  |

| Tax Structures                             | Client 1 | Client 2 |
|--|----------|----------|
| Company: Name / ACN                        |          |          |
| Superannuation Fund (SMSF): Name / ABN     |          |          |
| Trustee SMSF (Corporate or Individual)     |          |          |
| Trust: Name / Type                         |          |          |
| Trustee of Trust (corporate or individual) |          |          |
| Partnership: Name                          |          |          |

| Risk Management Arrangements |          |          |
|------------------------------|----------|----------|
| Do you smoke?                | Yes / No | Yes / No |
| General health?              |          |          |
| Any health Issues?           |          |          |

| Life Insurance + TPD                  |  |  |
|---------------------------------------|--|--|
| Sum Insured                           |  |  |
| Insurer                               |  |  |
| Policy Owner (Personal or Super Fund) |  |  |
| Date Commenced                        |  |  |
| Premium pa/pm.                        |  |  |

| Income Insurance / Business Overheads |  |  |
|---------------------------------------|--|--|
| Monthly Insured Benefit               |  |  |
| Insurer                               |  |  |
| Policy Owner                          |  |  |
| Waiting Period                        |  |  |
| Benefit Period                        |  |  |
| Date Commenced                        |  |  |
| Premium p.a. / p.m.                   |  |  |

| Trauma Insurance                      |  |  |
|---------------------------------------|--|--|
| Sum Insured                           |  |  |
| Insurer                               |  |  |
| Policy Owner (Personal or Super Fund) |  |  |
| Date Commenced                        |  |  |
| Premium p.a. /p.m.                    |  |  |

| Private Health Insurance      |  |  |
|-------------------------------|--|--|
| <b>Company</b>                |  |  |
| Type of Cover                 |  |  |
| Individuals Covered           |  |  |
| Premium                       |  |  |
| Features (full cover/partial) |  |  |



# LOCUMS GROUP

SINCE 1952

## OBJECTIVES, ATTITUDES, CONCERNS

| Objectives  | Comments |
|---|----------|
| <p><b>Liabilities</b></p> <p>Is it your intention to eliminate or significantly reduce borrowings at the earliest opportunity?</p> <p>If so, does this include both deductible and non-deductible borrowings?</p> |          |
| <p><b>Income</b></p> <p>Is it your intention to generate a high level of income from your portfolio?</p> <p>Is long term capital growth more important than short-term income and tax benefits?</p>               |          |
| <p><b>Lifestyle</b></p> <p>Are you prepared to make short-term cash-flow sacrifices for long-term financial gains?</p>  |          |
| <p><b>Estate Planning</b></p> <p>Do you have designated beneficiaries who have been specifically identified to receive bequests?</p>  |          |
| <p><b>Retirement Income</b></p> <p>What income do you require in today's dollars at retirement?</p> <p>Do you view your retirement as being a time when there will be a substantial requirement for income?</p>   |          |

| Attitudes  | Comments |
|--|----------|
| <p>Are you aware of the difference between tax-deductible and non-deductible debt?</p>   |          |
| <p>Which investment asset classes do you favour or dislike: equities, property, cash, fixed interest?</p>                                      |          |
| <p>What investment term would you consider appropriate for most of your investments: 3, 5, 7 years or longer?</p>                              |          |
| <p>How familiar or knowledgeable are you regarding investment markets and investment products?</p>   |          |
| <p>Are you comfortable with your present liabilities and your debt level in general?<br/>Is there any liability that you are unhappy with?</p> |          |

## OBJECTIVES, ATTITUDES, CONCERNS

| Objectives  | Comments |
|---|----------|
| <p><b>Risk:</b><br/>Are you concerned about loss of capital if investment returns vary during market fluctuations?</p>  |          |
| <p><b>Liquidity / Investment Flexibility/Liquidity:</b><br/>What level of cash reserves to meet emergencies or opportunities is required? Access: at all times; sometimes; or no need for ease of access?</p> |          |
| <p><b>Taxation:</b><br/>Are you concerned about the level of tax paid? Are you prepared to forgo some security to pay less tax?</p>   |          |
| <p><b>Ease of Portfolio Management:</b><br/>The ability to switch investments? Access to information? Level of involvement in the decision making process?</p>  |          |
| <p><b>Estate:</b><br/>Extent of concern about:<br/>Maximising value of your estate?<br/>Assets distributed according to your wishes?</p>  |          |
| <p><b>Retirement Capital:</b><br/>Will your current superannuation strategy provide you with sufficient capital to fund your desired level of income in retirement?</p>                                       |          |
| <p><b>Social Security:</b><br/>Do you wish to access government entitlements?<br/>Are Centrelink payments required for income flow?</p>   |          |

| Investor Profile (Finametrica Online Risk Profile) |  |                      |                  |                  |                  |                  |                  |
|--|--|----------------------|------------------|------------------|------------------|------------------|------------------|
| Finametrica Risk Profile                           | Defensive  | Moderately Defensive | Conservative     | Balanced         | Moderate         | Growth           | High Growth      |
| <b>Strategic Benchmark (Defensive/Growth)</b>      | <b>90% / 10%</b>   | <b>70% / 30%</b>     | <b>60% / 40%</b> | <b>40% / 60%</b> | <b>30% / 70%</b> | <b>20% / 80%</b> | <b>10% / 90%</b> |
| <b>Defensive</b>                                   | A Defensive Investor is primarily concerned with capital preservation; they are not prepared to take risks with their investment funds.  |                      |                  |                  |                  |                  |                  |
| <b>Moderately Defensive</b>                        | A Moderately Defensive Investor is primarily concerned with capital preservation; they are not prepared to take minimal risks with their investment funds.   |                      |                  |                  |                  |                  |                  |
| <b>Conservative</b>                                | A Conservative Investor is prepared to sacrifice higher returns for the benefit of capital protection.   |                      |                  |                  |                  |                  |                  |
| <b>Balanced</b>                                    | A Balanced Investor has some understanding of the behaviour of investment markets and is prepared to accept short term capital risk and volatility in order to gain longer term capital growth.  |                      |                  |                  |                  |                  |                  |
| <b>Moderate</b>                                    | A Moderate Investor understands that there will be a level of volatility in the value of their investments and is prepared to accept a small amount of risk in order to benefit from some capital appreciation.  |                      |                  |                  |                  |                  |                  |
| <b>Growth</b>                                      | A Growth Investor is prepared to sacrifice short term safety in order to maximise long term capital growth, therefore their portfolio is strongly biased toward Australian and International shares with fixed interest and property providing some income and stability of returns. |                      |                  |                  |                  |                  |                  |
| <b>High Growth</b>                                 | A High Growth Investor is prepared to sacrifice investment capital in pursuit of the highest long term capital growth.   |                      |                  |                  |                  |                  |                  |

## FINANCIAL ADVICE AND YOU

What are your reasons for seeking financial advice?

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Are there any specific issues that are of particular importance to you?

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Your short term goals (within the next 2 years): *Holiday, renovations, repay mortgage, travel, family, career.*

| Goals: <i>Within the next 2 years</i> | Start Date | Estimated Cost |
|---------------------------------------|------------|----------------|
|                                       |            |                |
|                                       |            |                |
|                                       |            |                |
|                                       |            |                |

Your medium term goals

| Goals: <i>Next 2-5 years</i> | Start Date | Estimated Cost |
|------------------------------|------------|----------------|
|                              |            |                |
|                              |            |                |
|                              |            |                |
|                              |            |                |

Your long term goals

| Goals: <i>More than 5 years to 10+ years</i> | Start Date | Estimated Cost |
|--|------------|----------------|
|  |            |                |
|  |            |                |
|  |            |                |
|  |            |                |



Are there any issues that we need to take into consideration that may affect you achieving your goals?

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Briefly detail your past experiences with financial advisers

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What are your expectations of our services?

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Do you require a cash reserve (for emergencies or discretionary spending)? Yes / No

If so, how much of a cash reserve do you require? \$ \_\_\_\_\_

What is your investment time-frame \_\_\_\_\_ Years

### RETIREMENT

|  | Client 1 | Client 2 |
|--|----------|----------|
| What is your planned retirement age?   | _____    | _____    |
| What amount (in today's dollars) of income do you need to support your preferred retirement lifestyle? | _____    | _____    |
| Do you intend to leave an inheritance to your beneficiaries?   | _____    | _____    |

### LIFESTYLE IN RETIREMENT

| Lifestyle Activity | Estimated Cost |
|--------------------|----------------|
| _____              | _____          |
| _____              | _____          |
| _____              | _____          |
| <b>Total</b>       | _____          |

## CLIENT ACKNOWLEDGEMENT

I have read the contents of this completed Client Fact Find. I agree that to the best of my knowledge it is complete and accurate, and that it full and fairly represents my financial situation, my needs and my objectives.

I also accept that any recommendations will be based on this information as well as current economic and investment market conditions.

I understand that any services or recommendations provided, on the basis of a partial or inaccurate completion of the Client Information Form may be inappropriate to my needs.

I appreciate that I may lose the right to seek compensation from the representative or the principal for any loss suffered as a consequence of incomplete or inaccurate information being provided.

If I have chosen not to provide sufficient information about your individual circumstances, I may risk making a financial commitment that may not be appropriate to me. A copy of the information collected can be made available to me upon request.

I have been advised that recommendations are limited to products approved and researched by Locumsgroup Asset Management Pty Limited

I allow Locumsgroup Asset Management Pty Limited and its employee representatives to retain my Tax File Number on their files.

**I have received a copy of the Financial Services Guide (version: 23 March 2020)** Yes   
No

**I acknowledge that the information supplied by me enables Locumsgroup Asset Management Pty Ltd to make reasonable recommendations upon which I will base my decisions.** Yes  No

**I have provided a copy of my photographic Identification** Yes  No

**In case of NO: I/we accept that the recommendations made are based on incomplete information**

**Client 1:**

Date: \_\_\_\_\_

**Client 2:**

Date: \_\_\_\_\_