



CLIENT AUTHORITY

I _____ Date of Birth _____

Of _____

And

I _____ Date of Birth _____

Of _____

Do hereby authorise Superannuation Recall Consultants/UK Pension Transfers Australia to carry out all administration procedures required in receiving my pension and superannuation.

I/We authorise Superannuation Recall Consultants/ UK Pension Transfers Australia to act on my/our behalf to liaise with the HM Revenue & Customs or any other institutions as may be necessary.

I/We authorise Superannuation Recall Consultants/UK Pension Transfers Australia to complete and or sign any necessary documentation, legal or otherwise to enable the execution of the above.

I/We acknowledge and hereby agree to any correspondence in relation to the above being delivered direct to Superannuation Recall Consultants/UK Pension Transfers Australia, U15/1 Irwin Rd Wangara WA 6065 please do not send any correspondence to our home address.

Signed _____ (Client 1)

Print name _____

D.O.B: _____ Date _____

Signed _____ (Client 2)

Print Name: _____

D.O.B: _____ Date _____

I authorise the following administrators to act on my behalf:

Samantha Rapoff

Kim Barnett

James Payne

MANAGE YOUR OWN SUPER Now!

PERTH- MANDURAH

15/1 Irwin Road, Wangara WA 6065 Tel: 08 9309 4001 Fax: 08 9309 4014

Email: superrecall@amnet.net.au Website: www.superannuationrecall.com.au • ABN 77 253 409 821