

### Adviser & Client Details

Adviser Name:		Practice:	
Client Name(s):		Date Required:	

### Paraplanning Request

**Document Required:**

- ☐ Statement of Advice
- ☐ Record of Advice
- ☐ Strategy Discussion Paper
- ☐ Financial Modelling/Projections

### Attachments Reminder

- ☐ Data Collection Form
- ☐ Risk Profile
- ☐ Meeting File Notes
- ☐ Super, Investment, insurance statements/quotes
- ☐ Replacement product analysis/Client Acknowledgements

### Adviser Remuneration

SoA Preparation Fee: \$	(inc. GST)	Implementation Fee: \$	(inc. GST)
Fee for Service: \$	(inc. GST)	Referral Commission: .....	of \$
		(to who?.....)	
<b>Super/Investment:</b>		<b>Risk Insurance (please attach quotes):</b>	
<input type="checkbox"/> Upfront Fee	or \$	<input type="checkbox"/> Upfront	1 <sup>st</sup> year: Ongoing
<input type="checkbox"/> Adviser Fee	or \$	<input type="checkbox"/> Hybrid	1 <sup>st</sup> year: Ongoing
<input type="checkbox"/> Other Fee	or \$	<input type="checkbox"/> Level	1 <sup>st</sup> year: Ongoing

### Client Reasons for Seeking Advice (Goals/Objectives) - Brief Summary

### Scope of Advice (Areas of Advice)

☐ **Full Advice (no limitations)**

☐ **Limited Advice (no limitations)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Cashflow/Budgeting | <input type="checkbox"/> Investment Planning | <input type="checkbox"/> Personal Risk Insurance |
| <input type="checkbox"/> Debt Management    | <input type="checkbox"/> Superannuation      | <input type="checkbox"/> Estate Planning         |
| <input type="checkbox"/> Wealth Management  | <input type="checkbox"/> Retirement Planning | <input type="checkbox"/> Aged Care               |
| <input type="checkbox"/> Gearing            | <input type="checkbox"/> SMSFs               |  |

**Reasons for limited advice:**

**Proposed Strategies & Products (including recommended product fees) - Please detail**

**Additional Information/Notes**