



Authority to Disclose (Account Holder)

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| To: FinClear Execution Ltd (FinEx) Level 3, 533 Little Lonsdale Street Melbourne VIC 3000 | Date: / / |
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I/we authorise FinClear Execution Ltd ABN: 56 061 751 102 AFSL: 246 842 (**FinEX**) to disclose current and historical account and transactional (including account balance) details (**Data**) in relation to my/our Accounts by electronic file (or such other method as agreed by FinEx) to Class Super Pty Ltd (ABN 46 121 158 503; AFSL 313512) and its Related Bodies Corporate jointly ("**Class**") each business day. We understand that Class will then make the Data available to the advisers and administrators nominated by myself to view the Accounts via a secure web application.

We understand and agree that:

1. No agency, partnership, joint venture or any other type of similar relationship exists between FinEx and Class;
2. Neither FinEx or Class will, subject to any prohibition or limitation imposed by law, be liable for delays, non-performance, failure to perform, processing errors or any other matter arising out of this agreement;
3. This agreement is to be read together with the relevant FinEx terms and conditions that govern the Accounts, however, to the extent of any inconsistency these terms will prevail;
4. To the maximum extent permitted by law, FinEx will not be liable to any person for their reliance on any Data supplied to Class or any failure of FinEx to provide information or to provide complete or accurate Data to Class;
5. FinEx may decide at its sole discretion, on any ground it thinks fit and, without rendering FinEx or Class liable in any way, to discontinue the provision of Data to Class pursuant to this authority by written notice to Class; and
6. I may terminate this agreement on providing 2 business days written notice to FinEx at the address above

This authority is only valid from the date it is received by FinEx and if signed by the authorised signatories to the Accounts.

Account Name: _____

Account No: _____

Primary administrator (Accountant, Adviser or Specialist SMSF Administrator Business)

Class Business Code: _____

Administrator Name: _____

Signed for and on behalf of:

Authorised signatories:

Signature

Name

Signature

Name