

# Macquarie Wrap Account grouping form – IDPS Wholesale Clients

Macquarie Investment Management Limited ABN 66 002 867 003 AFSL 237492. Macquarie Bank Limited ABN 46 008 583 542 AFSL 237502 is the issuer of the Macquarie Cash Management Account (CMA), Macquarie Consolidator Cash Account (Cash Account) and Macquarie Wrap Cash Account (Wrap Cash Account).

## Important information

This form can only be used to extend existing adviser service fee/s for a period of up to two years, where ALL accounts within a fee group are IDPS accounts, held by clients that meet the legal definition of wholesale clients under section 761G of the *Corporations Act 2001 (Cth)*. This form can only be used to extend adviser service fee/s on existing accounts within a fee group.

By completing this form, you are placing an instruction to extend the existing adviser service fee/s for the following group.

## 1. Group details

Group name:

## 2. Accounts within the group

**Please complete the details of all the accounts within this group**

Account 1 name:

Account number\*:

Account 2 name:

Account number\*:

Account 3 name:

Account number\*:

Account 4 name:

Account number\*:

Account 5 name:

Account number\*:

Account 6 name:

Account number\*:

Account 7 name:

Account number\*:

Account 8 name:

Account number\*:

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### 3. Expiry date of this renewal

Expiry date:

**Important: This date should not exceed the earliest Qualified Accountant Certificate expiry date of an account holder in this group and cannot exceed two years from date of signing.**

### 4. Adviser Attestation

- I attest that all clients within the group meet the definition of a “wholesale client” under the *Corporations Act 2001 (Cth)*.
- I will advise you as soon as possible, and in all cases, prior to this becoming untrue.
- I will, if requested by Macquarie, provide a Qualified Accountant Certificate to confirm that my clients are “wholesale clients”.
- I confirm that the instruction for fee renewal that I am giving to Macquarie is consistent with the advice fee arrangement(s) I have in place with my clients.

**Adviser signature (mandatory)**

Date

Adviser code:

Name:

Dealer/business group name:

Please upload the completed form to **Macquarie Request Centre**. You can access this through **Adviser Online**. Alternatively, please return via email to [wrapsolutions@macquarie.com](mailto:wrapsolutions@macquarie.com)

If you have any queries about completing this form please contact your adviser or us on **1800 025 063**.

For assistance completing this form, you can visit **Macquarie Help Centre**.