

## **AUTHORITY TO DISCLOSE**

To whom it May Concern,

·						
I	authorise	and c	direct			to
disclose/forward information	on pertainin	ig to	the	following	policy/s	and/or
account/s to QSA Financia	l Services as	reque	sted.	This does	not autho	rise any
dealings with our Account, only information as requested.						
Policy/Account Number/s:						
•						
DOB:						
		_	SI	GN HERE		
Signature:	Date:					

QSA Financial Services Pty Ltd ABN 26110666558 PO Box 4939 GCMC QLD 9726 Telephone: 07 5570 4600 Facsimile: 07 5570 4066

QSA is a Corporate Authorised Representative (No.301218) of My Adviser Pty Ltd (AFSL 238307)