



AUTOMATE

YOUR DATA COLLECTION

YOUR UNIQUE EMAIL FOR YOUR SMSF IS

AUTOMATE YOUR DATA COLLECTION

To authorise the automatic collection of your Contract Note data BGL requires you to complete the attached form and return to Rivkin Securities.

Please complete the following fields:

- Current Account Details
- Email Addresses
- Authority and Acknowledgement

YOUR BROKER

Rivkin Securities
1300 748 546
customerservice@rivkin.com.au
PO Box 1524
Double Bay NSW 1360

BGL.

Suite 2, 606-608 Hawthorn Road
PO Box 8063, Brighton East
Victoria 3187 Australia

T 1300 654 401
F (03) 9530 6964
E info@bglcorp.com.au
W www.bglcorp.com

STOCKBROKING ELECTRONIC CONFIRMATION AUTHORITY form

When completed, this form authorises us to send you trade confirmations electronically. This authority includes confirmation of share, option and warrant trades and replaces confirmations that are currently sent to you by post. You can revoke this authority at any time by instructing us in writing.

Current Account Details

Client Account Number:

Account Holder 1

Company name

Account Holder 2

(if applicable)

Account Designation

(if applicable)

< Account >

Instructions

Joint and Company Accounts

If you intend authorising a joint or company account to receive confirmations electronically then ALL account holders must sign below. That is, all joint account holders for joint accounts and the appropriately authorised officers for company accounts.

Authorised Agents

Only the account holder(s) may authorise electronic confirmations. A confirmation must be sent to you as the account holder but a duplicate copy may be sent to your authorised agent by including their email address as a secondary email address.

Email Addresses

Primary Email Address

To comply with the ASIC Market Integrity Rules the first email address must be that of the account holder.

Secondary Email Address

Other Email Address

Authority and Acknowledgement

I authorise CMC Markets Stockbroking to send me confirmations electronically in respect of the accounts listed above. I acknowledge that I will not receive confirmations by post unless this authority is revoked by me in writing.

Date / /20

Account Holder 1

Account Holder 2

Client Signature(s)

Name(s) (printed)

Title (if company)

e.g. director, officer, secretary