

14/09/2018

Lethbridge Family Super Fund
17 Sabre Close
FLETCHER NSW 2287

Dear Luke Lethbridge

TAX INVOICE

Count Financial ABN 19 001 974 625

The following fees have become payable for the selected services provided by myself on behalf of Count Financial Limited:

| <u>Service Provided:</u> | <u>Amount \$</u> |
|------------------------------------|-------------------------|
| Preparation of Statement of Advice | 2,000.00 |

Total Amount Due (GST inclusive) \$2,000.00

Due Date: 29/09/2018

Kind Regards,

**Please note all direct deposits are to be paid
directly to the Count Financial Bank account.
Direct deposit details attached.**

Damien McKern
Authorised Representative, Count
Financial Limited
Director of McKern Strategic Pty Ltd
1240005
NMFMCCKER

Looking after your financial life



Member of
"Count" and Count Wealth Accountants® are trading names of Count Financial Limited ABN 19 001 974 625, Australian Financial Services Licence Holder Number 227232 a wholly-owned, non-guaranteed subsidiary of Commonwealth Bank of Australia ABN 48 123 123 124.
Count is a Professional Partner of the Financial Planning Association of Australia Limited. Count advisers are authorised representatives of Count.
www.count.com.au

Fee Payment Form

Member Code: NMFMCCKER

Date: _____

Client Name:

LETH0006

Contact details in case of queries with this payment:

Name: Shahin Tehrani

Phone: 07 5522 3222

Payment Details

Payment on Account \$ _____

Other (provide details below)

_____ \$ _____

_____ \$ _____

_____ \$ _____

Payment Options

Cheque

Make cheques payable to Count Financial Ltd

Print this form and attach with your cheque

Post to:

Adviser Payments Team

Count Financial Ltd

Level 3E 11 Harbour Street

Sydney NSW 2000

Direct Deposit

Payment by EFT into the following bank account:

Account name: Count Financial Ltd

BSB: 062 000

Account no.: 10167214

Important: Include your member code in the reference field

Date of EFT: ____/____/____

And either Fax back to Accounts on 1300 457 703 or Email to accounts@count.com.au

Credit Card Authority

Amount: \$ _____ Cardholder Name: _____

Card Number: ____/____/____/____

Expiry date: _____ Signature: _____

Note: We can only accept Visa or MasterCard. We DO NOT accept Amex or Diners.

Please complete and return this form to the Adviser Payments Team; either by Fax to 1300 457 703 or Email to accounts@count.com.au. This is not a tax invoice. Your brokerage statement acts as your tax invoice and will be available for download from Voyager on or after the 10th of each month.

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