

# Letter of Authority



Member name

IPI number

I authorise

- to:
- make enquiries on my behalf; and
  - have access to my APRA and/or AMCOS information (including my list of works and royalty payment details); and
  - update my personal information

Please select from the following:

- I would still like all correspondence from APRA|AMCOS to be sent to myself
- I would like all future correspondence to be sent to my person of authority

This authority shall remain current until ceased by me in writing.

Member signature \_\_\_\_\_

## Branch Offices

[www.apra-amcos.com.au](http://www.apra-amcos.com.au)

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