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Superannuation tax form

Australian Government
Rollover initiation request to transfer whole balance of superannuation benefits between funds under the Superannuation Industry (Supervision) Act 1993

COMPLETING THIS FORM
 • Read the important information pages
 • Refer to instructions where indicated with a **1**
 • This form is only for whole (not part) balance transfers.

AFTER COMPLETING THIS FORM
 • Sign the authorisation
 • Send form to either your **FROM** (transferring) or **TO** (receiving) fund.

Personal details

Title: Mr Ms Mx Other

*Family name

*Given names

Other previous names

*Date of birth: Day / Month / Year

Tax file number

Under the Superannuation Industry (Supervision) Act 1993, you are not obliged to disclose your tax file number, but there may be tax consequences.

1 See 'What happens if I do not quote my tax file number?'

*Sex: Male Female

Contact phone number

Residential address

Address

*Suburb

*State/Territory *Postcode

Previous address

1 If you know that the address held by your **FROM** fund is different to your current residential address, give details below.

Address

Suburb

State/Territory Postcode

Fund details

FROM (transferring fund)

*Fund name

Fund phone number

*Membership or account number

Australian business number (ABN)

Unique Superannuation Identifier

1 If you have multiple account numbers with this fund, you must complete a separate form for each account you wish to transfer.

TO (receiving fund)

*Fund name

Fund phone number

*Membership or account number

Australian business number (ABN)

Unique Superannuation Identifier

1 You must check with your **TO** fund to ensure they can accept the transfer.

Authorisation

By signing this request form I am making the following statements:

1 I declare I have fully read this form and the information completed is true and correct.

1 I am aware I may ask my superannuation provider for information about any fees or charges that may apply, or any other information about the effect this transfer may have on my benefits, and have obtained or do not require such information.

1 I consent to my tax file number being disclosed for the purposes of consolidating my accounts.

1 I discharge the superannuation provider of my **FROM** fund of all further liability in respect of the benefits paid and transferred to my **TO** fund.

I request and consent to the transfer of superannuation as described above and authorise the superannuation provider of each fund to give effect to this transfer.

* Denotes mandatory field. If you do not complete all of the mandatory fields, there may be a delay in processing your request.

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ORDER FORM - SUPERANNUATION FUND FORM

Firm / Person Placing Order

Firm Name Contact Name

Delivery Address (no PO boxes)

Suburb State Postcode

Phone Email

Desired Name of Trust

How Will Payment Be Made

Account number

Direct Deposit: BSB 082 210 Acct. 1034 5488 (Please use desired trust name or reference)

Cheque (Must be cleared before processing and made payable to Patricia Holdings)

Credit Card Number Expiry Date

Card Holder Name

Type of Card: MasterCard Visa Amex (NB: Amex will incur 3.85% incl. GST fee)

Signature

Trust - Delivery Type

A \$324.50
 A quality bound Trust Register delivered to you via courier.
 Please choose either Grey or White Deluxe Black Folder (\$33.00 extra)

B \$380.50
 A PDF version of the Trust Register delivered to you via email.

Package Deals (Some deals, if not part of a package)
 (VAT - Best Acquisition Deal, SMSF - Self Managed Superannuation Fund)

<input type="checkbox"/> Company + Cash Coursenod: \$1073.50	<input type="checkbox"/> Company + Cash Emailed: \$708.50
<input type="checkbox"/> AAT + SMSF Coursenod: \$638.00	<input type="checkbox"/> AAT + SMSF Emailed: \$550.00
<input type="checkbox"/> Company + AAT + SMSF Coursenod: \$1392.00	<input type="checkbox"/> Company + AAT + SMSF Emailed: \$1183.00
<input type="checkbox"/> 2 Companies + AAT + SMSF Coursenod: \$2136.00	<input type="checkbox"/> 2 Companies + AAT + SMSF Emailed: \$1806.00

March 2016

Early Release of Superannuation on Specified Compassionate Grounds

Report by Medical or Dental Practitioner and/or Specialist

Returning your form

Check that you have answered all the questions you need to answer and that you have signed and dated this form.

Send the completed form(s) to:

Department of Human Services
ERSB Programme
PO Box 1001
TUGGERANONG DC ACT 2901

or

Scan and email: ERSBEnquiries@humanservices.gov.au

Patient's details

1 Dr Mr Mrs Miss Ms Other

Family name

First given name

Other given name(s)

Previous name(s) (if applicable)

2 Date of birth

/ /

3 Sex

Male

Female

4 Address

Postcode

5 Postal address (if different to above)

Postcode

6 Patient's contact phone number

()

7 Is there a worker's compensation claim relating to this condition?

No

Yes

Your patient needs to attach claim details which show which expenses are or are not covered by a worker's compensation claim.

8 Is your patient applying for an early release of their own superannuation?

No

Yes **Go to 10**

9 Give details of the person applying for their superannuation to pay for your patient's medical costs

Family name

First given name

Relationship to patient

10 Does your patient need:

Medical treatment

Dental treatment

None of the above Your patient may not be eligible for an early release of superannuation. Call 1300 131 060

Patient's medical condition

11 What does your patient need medical treatment for?

A life threatening illness or injury

An acute or chronic pain

An acute or chronic mental illness

None of the above Your patient may not be eligible for an early release of superannuation. Call 1300 131 060

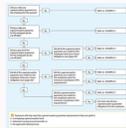
12 What is the name of your patient's condition?

13 What is the name of the medical treatment your patient needs?

M0017.1405 (formerly 8490)

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Superannuation tax deduction form. Superannuation contributions tax form. Australian tax office superannuation form. Do you declare superannuation on tax return. Superannuation tax return form.



Your TFN can be shared with another super provider when your benefits are being transferred unless you request writing that your TFN is not shared. And the more we know about them as happens adults to become our finances. They base this on information about the W-4 form of each function. If much of your salary is deducted in taxes, you will be able to a refund later. We recommend that you provide this for your advisor or tax accountant, or at the request of the act. Service is a subsidiary of Liberty Tax.CC BY-SA 2.0 / 401 (K) 2013 / Flickr H & R Block Free EditionNH & R Block offers a friendly tax archiving service for people aged 51 years or less earning less than \$ 66,000. It is not suitable for complex returns such as capital gains, self-employment, dividends and rental of income.taxact free editionanother option for simple cases . 1040EZ form or formula 1040A . TaxTict Free Edition It is a reliably service. Therefore, even if you know that you will not be able to pay your tax account, you must still present your return on time. How to provide your TFN connect to 1300 361 784 from 8h to 20h from Monday to Friday to AEST / AEDT. CC by 2.0 / Investment / Flickr Understand your taxes and prepare your returns may be enough of an incidence, without having to pay for a professional fiscal consultant as well. You can use it if you qualify for federal federal income tax criterion or get less than \$ 55,000 and are 56 and younger. Your CBUS retirement can be an effective fiscal investment, which can be: less taxed investment earnings, compared to many other tax-free investments when you take it out after 60 years deductible to those who are commercial Eligible or self-employed for tax compensation when the Personal are made by a couple. Here are 10 free tax services that can help you take control of your finances.taxslayer's free file federaltaxslayer offers a free archiving service for anyone under the age of 50 years earn less than \$ 66,000. It is also available for members of active military service that earn less than \$ 66,000.CC BY-SA 2.0 / 401 (K) 2013 / Flickr TurboTax Federal Federal Option OptionFree Accounting Online Accounting and Tax Services Nā It receives much more friendly than that. This can vary widely from the doctor, and that is why the price of the goals can be so different depending on where you are in the country. The comparison of tax on state for state (in October 2018) reveals some of the most favorable à € à €

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