

Section 1 - Current membership details at SMERF

Title	Family Name	Given Names
<input type="text"/>	<input type="text"/>	<input type="text"/>
Street/RMB/PO Box		
<input type="text"/>		
Suburb/Town/Shire	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth	Member Number	Gender: Please fill one <input type="radio"/> Female <input type="radio"/> Male
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	
Ph - Home	Ph - Work	
(<input type="text"/>) <input type="text"/>	(<input type="text"/>) <input type="text"/>	
Mobile	Facsimile	
<input type="text"/>	(<input type="text"/>) <input type="text"/>	
E-mail		
<input type="text"/>		
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. See notes for further information.	
<input type="text"/> - <input type="text"/> - <input type="text"/>		

Section 2 - Details of your other fund (refer to your Annual Member Benefit Statement)

Please note: If you have more than one other super account, contact us and we will send you additional Rollover Forms. Or you can simply photocopy this form as many times as required.

The following details can be found on your membership statement from your other fund.

Name of Superannuation Fund or Company where benefits are held		
<input type="text"/>		
Address of Superannuation Fund or Company		
<input type="text"/>		
Suburb/Town/Shire	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Membership No (refer to previous member statements)	Have you ceased employment with the employer who contributed to this fund?	
<input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
SPIN	If yes, what date did you cease employment with that employer? Date	
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	



NOTES**TRANSFER OF BENEFITS TO SMERF (NOTES FOR MEMBERS)**

By completing this form, you will request the transfer of the **WHOLE** balance of your previous superannuation fund to SMERF. This form can **NOT** be used to transfer part of the balance. This form will **NOT** change the fund to which your employer pays contributions.

AFTER COMPLETING THIS FORM

- Sign the authorisation.
- Attach the appropriately certified proof of identity documents.
- Review the checklist below.
- Send the request form to:

SMERF
Locked Bag 8840
Wollongong NSW 2500

IMPORTANT INFORMATION

This transfer may close your account with your previous fund. You will need to check this with your previous fund.

This form can NOT be used to:

- transfer part of the balance of your superannuation benefits from your previous funds
- transfer benefits if you do not know where your superannuation benefit is
- transfer benefits from multiple funds on this one form - a separate form must be completed for each fund you wish to transfer superannuation from
- change the fund to which your employer pays contributions on your behalf
- open a superannuation account, or
- transfer benefits under certain conditions or circumstances, for example if there is a superannuation agreement under the Family Law Act 1975 in place.

CHECKLIST

- Have you read the important information?
- Have you considered where your future employer contributions will be paid?
- Have you completed all of the fields on the form?
- Have you signed and dated the form?
- Have you attached the certified documentation including any linking documents if applicable?

WHAT HAPPENS TO MY FUTURE EMPLOYER CONTRIBUTIONS?

Using this form to transfer your benefits to SMERF will not change the fund to which your employer pays your contributions and may close your account with the fund you are transferring your benefits from.

If you wish to change the fund into which your contributions are being paid, you will need to speak to your employer about Choice. SMERF does not accept employer contributions.

For the appropriate forms and information about whether you are eligible to choose the fund to which your employer contributions are made, visit **www.superchoice.gov.au** or call the Tax Office of **13 10 20**.

THINGS YOU NEED TO CONSIDER WHEN TRANSFERRING YOUR SUPERANNUATION

When you transfer your superannuation, your entitlements under that fund may cease. You need to consider all relevant information before you make a decision to transfer your superannuation. If you ask for information, your superannuation fund must give it to you. Some of the points you may consider are:

- **Fees** - your previous superannuation fund must give you information about the any administration, exit or withdrawal fees. If you are not aware of the fees that may apply, you should contact your fund for further information before completing this form. SMERF does not charge a fee for rolling benefits into the fund.
- **Death and disability benefits** - your previous superannuation fund may insure you against death, illness or an accident which leave you unable to return to work. If you choose to leave that fund you may lose any insurance entitlements you may have. SMERF does not offer insurance for death and disability.

If you require additional information about superannuation you may wish to visit the Australian Securities and Investment Commission website **www.fido.asic.gov.au**

WHAT HAPPENS IF I DO NOT QUOTE MY TAX FILE NUMBER (TFN)?

You are not obligated to provide your TFN to your superannuation fund. However, if you do not provide your TFN, you will be taxed at the highest marginal rate plus the Medicare levy, compared to the concessional tax rate of 15%.

Choosing to quote your TFN will also make it easier to keep track of your superannuation in the future.

Under the Superannuation Industry (Supervision) Act 1993, your superannuation fund is authorised to collect your TFN, which will only be used for lawful purposes. These purposes may change in the future as a result of legislative change. The TFN may be disclosed to another superannuation provider, when your benefits are being transferred, unless you request in writing that your TFN is not to be disclosed to any other trustee.

COMPLETING PROOF OF IDENTITY

You will need to provide documentation with this transfer request to prove you are the person to whom the superannuation entitlements belong.

Acceptable documents

The following documents may be used.

EITHER

One of the following documents only:

- Driver's licence issued under State or Territory law
- Passport

OR

One of the following documents	AND	One of the following documents
<ul style="list-style-type: none"> ● Birth certificate or birth extract ● Citizenship certificate issued by the Commonwealth ● Pension card issued by Centrelink that entitles the person to financial benefits 		<ul style="list-style-type: none"> ● Letter from Centrelink regarding a Government assistance payment ● Notice issued by Commonwealth, State or Territory within the past twelve months that contains your name and residential address. For example: <ul style="list-style-type: none"> - Tax Office Notice of Assessment - Rates notice form local council

Have you changed your name or are you signing on behalf of another person?

If you have changed your name or are completing the form on behalf of the applicant, you will need to provide a linking document. A linking document is a document that proves a relationship exists between two (or more) names.

Suitable linking documents:

Change of Name Marriage certificate, deed poll or change of name certification from the Births, Deaths and Marriages Registration Office.

Signed on behalf of the Applicant Guardianship papers or Power of Attorney

Certification of personal documents

All copied pages of original proof of identity documents or change or name documents must be certified as true copies by an individual approved to do so.

Persons who are authorised to certify documents must sight the original and the copies and make sure both documents are identical, then make sure that all copies are certified as true copies by writing or stamping 'certified true copy' followed by the individuals signature, printed name, qualification and date.

The following persons are eligible to certify copies of original documents:

- A permanent employee of Australia Post with five or more years of continuous service
- A finance company officer with five or more years of continuous service (with one or more finance companies)
- An officer with, or authorised representative of, a holder of an Australian Financial Services License (AFSL) having five or more years of continuous service with one or more licensees
- A notary public officer
- A police officer
- A registrar or deputy registrar of a court
- A Justice of the Peace
- A person enrolled on the roll of a State or Territory Supreme Court of the High Court of Australia, as a legal practitioner
- An Australian consular officer or an Australian diplomatic officer
- A judge of the court
- A magistrate, or
- A Chief Executive Officer of a Commonwealth Court.