

Contribution remittance advice

Personal Superannuation Masterfund



Section 1 - Member/Employee Details

<input type="text"/>	<input type="text"/>
Surname	Given name(s)
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Membership number	Date of birth

Section 2 - Employer Details (Contribution Payer) (If Applicable)

<input type="text"/>	<input type="text"/>	
Company name/Business name	ABN	
<input type="text"/>	<input type="text"/>	
Contact name	Contact telephone number	
<input type="text"/>		
Postal address		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Town/Suburb	State	Post code

Section 3 - Contribution Details

Please write in the amount of contribution in the relevant category below:

Member voluntary contribution	Spouse contribution	SG/Award contribution	Salary Sacrifice contribution	Voluntary employer contribution	Total
\$	\$	\$	\$	\$	\$

Section 4 - Payment Details

Contributions can be made in two ways:

- By cheque made payable to: 'National Nominees - Freedom of Choice' and marked 'Not negotiable'**
If paying by cheque, please send the cheque and this contribution remittance advice to the address at the bottom of this page.
- By Electronic Funds Transfer (EFT) to the following bank account:**
BSB Number: 033 009 Account number: 103074
Account name: FOC - Application Account
If paying by EFT, you must also include the employee's fund membership number in the transaction description when making the EFT payment. You must also send this contribution remittance advice to the address at the bottom of the page or fax it to (03) 8623 5385.

Section 5 - Employer/Member Declaration

I acknowledge that the details provided in this advice are true and correct.

<input checked="" type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature	Date