# Authority for TelstraSuper to release information



Complete this form to authorise the release of information about your TelstraSuper account to another person.

#### **RED SECTIONS FOR YOUR INFORMATION**

**GREY SECTIONS TO FILL OUT** 

### Before you start

Complete this form to authorise TelstraSuper to release information about your TelstraSuper account to another person (e.g. your financial adviser, accountant, tax adviser, solicitor, spouse/partner or family member).

The authorised person will not be able to change any of your personal details, give any instructions or carry out any transactions on your TelstraSuper account such as switching investment options or requesting a roll over to your TelstraSuper account on your behalf.

Your Tax File Number and bank account details will not be disclosed to your authorised person. This authority will remain in effect for a period of two years from the date this form is signed or until your death, whichever is earlier.

You can revoke the authority at any time by completing the **Revoking an Authority to Release Information** form. The revocation will take effect from the date the form is processed by TelstraSuper.

If you are signing this form on behalf of another person, you will need to provide complete and attach an **Authorised Third Party Representative Identification** form available at **telstrasuper.com.au/forms** and include any certified documents as required.

If you have any questions, please contact TelstraSuper on 1300 033 166.

Please note: We cannot accept any electronic signatures on this form.

Please note: This authority does not allow TelstraSuper Financial Planning to discuss your financial affairs with another person, including TelstraSuper. To authorise TelstraSuper Financial Planning to do so, you will need to complete an Authority for TelstraSuper Financial Planning to release information form.

# YOUR BASIC INFO

1. Your details currently held by TelstraSuper								
Title	Mr	Mrs	Miss	Ms	Other			
Surname*						Member number*		
Given name(s)*						Date of birth*		
Residen	tial address	S* (PO Box not	acceptable)					
Suburb* State*					State*	Postcode*		
Mobile/contact no.* Email*					Email*			

#### \* Mandatory fields.

**Note:** We'll be unable to process this form if your contact or personal details are different to the details we currently hold for you. To check and/or update your details before you submit this form you can:

- log into your SuperOnline account, or
- call us on 1300 033 166, or
- complete a Change of contact details form to update your contact details or a Change of member details form to update your personal details
  available at telstrasuper.com.au/forms and submit it with this form.



#### Before you act

You may wish to consult an adviser before you make any decisions relating to your financial affairs. To speak with an adviser from TelstraSuper Financial Planning call 1300 033 166.

Ri5ED	2. Authorised person's	details								
50N	Name									
7	Relationship to you (you must tick one option)									
	Financial Adviser	Solicitor	Accountant	Tax Adviser	Spouse/partner	F				
	Organisation (if applicable)									
	Address									
	Suburb		State	Postcode						
	Contact phone no.		Mobile							
	Email address									
	Additional details about your authorised person's organisation (if applicable)									
ONAL AIL5	ABN/ACN number		AFSL number							
7	My information can be given to any person in this organisation. My information can only be given to the persons in the									

#### 3. Member declaration and signature

- I authorise TelstraSuper to release information about my TelstraSuper account to the authorised person(s) named in section 2.
- I acknowledge that:
  - this authority will remain in effect for a period of two years from the date I sign this form unless revoked by me at any time before the end of the two year period by completing a **Revoking an Authority to Release Information** form
  - · this authority will also be revoked upon my death
  - this authority will not allow the authorised person to change my personal details or carry out transactions on my TelstraSuper account on my behalf
  - TelstraSuper will not be responsible for any losses or delays resulting from providing information to my authorised person(s).
- I agree to release, discharge and indemnify TelstraSuper from and against all actions, claims, demands, expenses and liabilities that I suffer or
  are suffered or brought against TelstraSuper in respect of information released to the authorised person(s) by TelstraSuper.
- I consent to my personal information being used in accordance with TelstraSuper's Privacy Policy and Privacy Collection Statement.

Each person who signs this form on behalf of the applicant named in this form:

- represents and warrants that they are lawfully appointed as guardian, administrator or attorney (as applicable), and
- declares that they are acting in accordance with the terms of the relevant power of attorney, guardianship order or administration order, including that
  if more than one person must act under the appointing document, all nominated persons must include their name, signature and date on this form
  below, and
- declares that their appointment remains valid and current as at the date of this form.

State your c	apacity (if applicable):	Guardian	Administrator	Attorney	
Name					
Signature	X				Date
	Electronic signature is not				





## Please upload completed form via your SuperOnline account or return it to:

PO Box 14309, MELBOURNE VIC 8001

Telstra Super Pty Ltd, ABN 86 007 422 522, AFSL 236709 is the trustee of the Telstra Superannuation Scheme ABN 85 502 108 833 (TelstraSuper). Telephone 1300 033 166 Website telstrasuper.com.au

Telstra Super Pty Ltd complies with the Privacy Act 1988 (Cth). For further information on privacy visit our website at telstrasuper.com.au to download a copy of our Privacy Policy or Privacy Collection Statement.

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organisation listed below.