

# **Super Choice Form**

Complete this form to advise your employer that you are nominating TelstraSuper as your choice of fund.

### Before you start

Employees use this form to advise their employer that they have nominated TelstraSuper as their chosen fund under Choice of Fund legislation. Complete sections 1, 2 & 3 of this form and then give it to your employer to implement.

#### Important information

- · Your employer is only required to accept one choice of fund from you in a 12 month period, however, they may accept more.
- Your employer has two months after you return this form to them to action your request.
- Any money you have in existing funds will remain there unless you arrange to transfer it (roll it over) to another fund check the impact of exit fees you will incur or benefits you may lose before leaving the fund (your employer cannot do this for you).
- If you quote your TFN to your employer for super purposes, they must provide it to the super fund.

For more information please contact us on 1300 033 166.

1. Your	1. Your details						
Title	Mr	Mrs	Miss	Ms	Other	BA5i0 INFO	
Surname	е					K	
Given na	ame(s)				Date of birth		
Employe	e identifica	ation number	(if applicable)	)			
2. Your	chosen t	und details				MEMBI	
Fund na	me Telst	ra Superannı	uation Schem	е	Unique superannuation identifier (USI) TLS0100AU ABN 85 502 108 833	NUMBE	
Your me	mber num	ber					
3. Your	authoris	ation and s	ignature				
I wish to	nominate T	elstraSuper a	s my chosen f	und for i	my future super contributions.		
Signature	e X				Date		

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## 4. Information for the employer

Your employee has given you this form because they have chosen to have their future super contributions paid into their TelstraSuper account. Please note the Important Information above.

#### Compliance statement

The Telstra Superannuation Scheme:

- is a complying resident regulated superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 (Act)
- is not subject to a direction under section 63 of the Act and does not expect to receive such a direction
- is able to accept Superannuation Guarantee contributions from employers on behalf of their employees
- offers death insurance cover that meets the minimum requirements for Choice of Fund set out in the Superannuation Guarantee (Administration) Act 1992.

### How to make contributions to TelstraSuper

Simply contact your SuperStream solution provider and use the following information:

Please give this form to your employer. Do not send to TelstraSuper.

Fund name: Telstra Superannuation Scheme

**ABN:** 85 502 108 833 **USI:** TLS0100AU

Record of Choice (Employer use only)

Date valid choice is received

Date you act on your employee's choice

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

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