Superannuation lump sum pre-payment statement

Warning: This form has been designed to assist you to prepare the Australian Tax Office's Superannuation lump sum prepayment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

payment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.					
Part 1 - SUPERANNUATION PROVIDER T	O COMPLETE				
Section A: Superannuation provider details					
Superannuation fund, ADF, RSA or annuity provider name					
R&S STAFFORD SMITH SUPERANNUATION FUND					
2 Postal address					
PO BOX 195 TOOWONG QLD 4066					
3 Australian business number (ABN) or withholder pa	ayer number				
86185284941					
4 Authorised contact person					
RICHARD STAFFORD-SMITH					
5 Daytime phone number					
0412 182830					
Section B: Member's details					
6 Full name					
Title					
Family Name					
STAFFORD-SMITH					
First given name	Other given names				
SUSAN					
7 Postal address					
PO BOX 195 TOOWONG QLD 4066					

8 Date of birth	06/01/1965
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Se	ction C: Superannuation lump	sum payment	details			
9	Lump sum payment is calculated to	this date	09/10/2014			
10	Superannuation lump sum compone					
	Taxable component					
	Taxed element	\$	298,141.00			
	Untaxed element	\$				
	Tax-free component	\$				
	KiwiSaver tax-free component	\$				
	Total amount	\$	298,141.00			
11 Preservation amounts of the superannuation lump sum						
	Preserved amount	\$	298,141.00			
	Restricted non-preserved amount \$					
	Unrestricted non-preserved amount	\$				
	Total amount	\$	298,141.00			
Section D: Superannuation provider's signature 12 Date the statement is issued to the member / 13 Member is to return statement by / 14 Superannuation fund's, ADF's, RSA's or annuity provider's signature			/ / / /			
				Date / /		

S	ection E: Ca	sh amount						
1	Pay me a gro	ess cash amount of:	\$	298,141.00				
	I understand to may be subject	that this amount et to tax			_			
	superannuat	ay wish to speak with tion fund, ADF, RSA e aware of your tax o tions.	or annuity provid					
S	ection F: Ro	llover payment						
2	Roll over my	payment to: (provide	the full name of f	und, RSA or annu	ity provider)			
3	Fund ABN							
4	Superannuati	ion fund, ADF, RSA	or annuity provid	er postal address:				
	Member acco	ount number						
6	Roll over an a	amount of:	\$					
S	I auth	ember's declarat orise my superannua AN STAFFORD- SMITH		e paid as instructe	d on this statement.			
5	Signature					Date	I	1
(Give this comple	eted statement to your s	super fund. You sho	uld keep a copy for	your records for a period	d of five years.		

PAYG Payment Summary - Superannuation Lump Sum Payment summary for year ending 30 June 2015

Payment summary for year ending 30 June 2015
Warning: This form has been designed to assist you to prepare the Australian Tax Office's PAYG Payment Summary Statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

Payee Details				
Payee's surname or family name				
STAFFORD-SMITH				
Payee's given name(s)		_		
SUSAN				
Payee's address				
PO BOX 195				
TOOWONG QLD 4066				
Date of birth	06/01/1965			
	odge a tax return. If you have already lodg bout this payment summary, lodging your ck - phone 13 28 61			
Date of payment	09/10/2014			
Payee's Tax File Number	488280177	Total Tax withheld	\$	
Taxable component				
Taxed element	298,141			
Untaxed element				
Tax free component				
KiwiSaver tax-free component		_		
Death benefit		_		
Type of death benefit				
Payer Details				
Payer's ABN or Withholder Payer	er Number	Branch Number		
86	5185284941			
Payer's Name				
R&S STAFFORD SMITH SU	PERANNUATION FUND			
Signature of authorised person			_	
				_
				Date
				/ /