

Rollover Benefit Statement

Original - Send to rollover fund within 7 days of payment

Section 1 - Receiving fund details

THIS FORM DOES NOT HAVE TO BE INCLUDED IN A TAX RETURN

AustralianSuper
GPO Box 1901
MELBOURNE VIC 3001
AUSTRALIA

Payee ABN 65 714 394 898

Unique Superannuation Identifier (USI)

Member Client Identifier 1072916507

Section 2 - Individual's details

Individual's full name	Mr	Surname or family name	Blakemore		
Title					
First given name	Mark				
Other given names	Andrew				
Address	40 Dava Drive				
	MORNINGTON VIC 3931				
	Email jgibbon@bigpond.net.au			Ph (04) 2356 1792	
Date of Birth	21/09/1960	Sex	M	Tax File Number (if required or permitted by)	312-483-329
Name and Address of authorised agent or advisor (if any) Must be authorised to receive information about this roll-over from the roll-over fund.					
	Ph				

Section 3 - Roll-over payment details

Eligible Service Period

Components		Date started	08/12/1960
Tax-free component	\$5,243.97	Preservation amounts of the Roll-over payment	
KiwiSaver tax-free component	\$0.00	Preserved amount	\$28,656.41
Taxable component		KiwiSaver preserved amount	\$0.00
Element taxed in the fund	\$69,290.23	Restricted Non-Preserved	\$0.00
Element untaxed in the fund	\$0.00	Unrestricted Non-Preserved	\$45,877.79

Tax components TOTAL \$74,534.20

Preservation amounts TOTAL \$74,534.20

BOTH AMOUNTS MUST BE EQUAL

Section 4 - Non-complying Funds

Contributions made to a non-complying fund on or after 10 May 2006

\$0.00

Section 5 - Transferring fund details

Payer ABN 31 952 911 451

Payer's Name	The Blakemore Retirement Fund		
Contact Name	Mr Mark Andrew Blakemore	Email	jgibbon@bigpond.net.au Ph (04) 2356 1792

Rollover Benefit Statement

Original - Send to rollover fund within 7 days of payment

Section 6 - Declaration

TRUSTEE, DIRECTOR OR AUTHORISED OFFICER DECLARATION

I declare that the information contained in this statement is true and correct.

Name

Mr Mark Andrew Blakemore

Trustee, director or officer signature

Date: / / 20

OR

AUTHORISED REPRESENTATIVE DECLARATION

I declare that:

- I have prepared the statement with the information supplied by the superannuation provider
- I have received a declaration made by the superannuation provider that the information provided to me for the preparation of this statement is true and correct
- I am authorised by the superannuation provider to give information in the statement to the ATO

Name

Mr Mark Andrew Blakemore

Authorised representative signature

Date: / / 20

Tax agent number (if you are a registered tax agent)

Where to send this form

If the rollover standards **do not apply** to the transaction, you must do all of the following:

- send the form to the receiving fund in section 1 within seven days of paying them the rollover
- provide a copy to the member in section 2 within 30 days of paying them the rollover
- keep a copy in your records for a period of five years.

If the rollover standards **do apply** to the transaction, you must do all of the following:

- comply with the requirements of the data standard for the fund-to-fund interaction (do not send this form to the receiving fund in section 1)
- use this form only to provide a statement to the member in section 2 within 30 days of paying the rollover
- keep a copy of the member statement in your records for a period of five years.

Rollover Benefit Statement

Duplicate - Send to member within 30 days of rollover payment

Section 1 - Receiving fund details

AustralianSuper
GPO Box 1901
MELBOURNE VIC 3001
AUSTRALIA

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INCLUDED IN A TAX RETURN

Payee ABN 65 714 394 898

Unique Superannuation Identifier (USI)

Member Client Identifier 1072916507

Section 2 - Individual's details

Individual's full name	Mr	Surname or family name	Blakemore		
Title					
First given name	Mark				
Other given names	Andrew				
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	MORNINGTON VIC 3931				
	Email jgibbon@bigpond.net.au		Ph (04) 2356 1792		
Date of Birth	21/09/1960	Sex	M	Tax File Number (if required or permitted by)	312-483-329
Name and Address of authorised agent or advisor (if any) Must be authorised to receive information about this roll-over from the roll-over fund.					
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Section 3 - Roll-over payment details

Components		Eligible Service Period	
Tax-free component	\$5,243.97	Date started	08/12/1960
KiwiSaver tax-free component	\$0.00	Preservation amounts of the Roll-over payment	
Taxable component		Preserved amount	\$28,656.41
Element taxed in the fund	\$69,290.23	KiwiSaver preserved amount	\$0.00
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Tax components TOTAL \$74,534.20

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BOTH AMOUNTS MUST BE EQUAL

Section 4 - Non-complying Funds

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Section 5 - Transferring fund details

Payer ABN 31 952 911 451

Payer's Name The Blakemore Retirement Fund

Contact Name Mr Mark Andrew Blakemore Email jgibbon@bigpond.net.au Ph (04) 2356 1792

Rollover Benefit Statement

Duplicate - Send to member within 30 days of rollover payment

Section 6 - Declaration

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Rollover Benefit Statement

Triplicate - Keep for your fund records

Section 1 - Receiving fund details

THIS FORM DOES NOT HAVE TO BE INCLUDED IN A TAX RETURN

AustralianSuper GPO Box 1901 MELBOURNE VIC 3001 AUSTRALIA	<table style="width: 100%;"> <tr> <td style="width: 70%;">Payee ABN</td> <td style="width: 30%;">65 714 394 898</td> </tr> <tr> <td>Unique Superannuation Identifier (USI)</td> <td></td> </tr> <tr> <td>Member Client Identifier</td> <td>1072916507</td> </tr> </table>	Payee ABN	65 714 394 898	Unique Superannuation Identifier (USI)		Member Client Identifier	1072916507
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Individual's full name	Mr	Surname or family name	Blakemore
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Other given names	Andrew		
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	MORNINGTON VIC 3931		
	Email jgibbon@bigpond.net.au		Ph (04) 2356 1792
Date of Birth	21/09/1960	Sex	M
		Tax File Number (if required or permitted by)	312-483-329
Name and Address of authorised agent or advisor <i>(if any)</i>			
Must be authorised to receive information about this roll-over from the roll-over fund.			
	Ph		

Section 3 - Roll-over payment details

Components	Eligible Service Period
Tax-free component	Date started
\$5,243.97	08/12/1960
KiwiSaver tax-free component	Preservation amounts of the Roll-over payment
\$0.00	Preserved amount
Taxable component	\$28,656.41
Element taxed in the fund	KiwiSaver preserved amount
\$69,290.23	\$0.00
Element untaxed in the fund	Restricted Non-Preserved
\$0.00	\$0.00
	Unrestricted Non-Preserved
	\$45,877.79

Tax components TOTAL	\$74,534.20	Preservation amounts TOTAL	\$74,534.20
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BOTH AMOUNTS MUST BE EQUAL

Section 4 - Non-complying Funds

Contributions made to a non-complying fund on or after 10 May 2006

\$0.00

Section 5 - Transferring fund details

Payer's Name	Payer ABN
The Blakemore Retirement Fund	31 952 911 451
Contact Name	Email jgibbon@bigpond.net.au Ph (04) 2356 1792
Mr Mark Andrew Blakemore	

Rollover Benefit Statement

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