



Notice of intent to claim or vary a deduction for personal super contributions

COMPLETING THIS STATEMENT

- Print clearly using a black pen only.
- Use BLOCK LETTERS and print one character per box.
- Place in ALL applicable boxes.

i The instructions contain important information about completing this notice. Refer to them for more information about how to complete and lodge this notice.

Section A: Your details

1 Tax file number (TFN)

623 270 964

i The ATO does not collect this information provided on this form. This form is to assist you in providing details to your super fund. Your super fund is authorised to request your personal details, including your TFN, under the *Superannuation Industry (Supervision) Act 1993*, the *Income Tax Assessment Act 1997* and the *Taxation Administration Act 1953*. It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution(s) covered by this notice. For more information about your privacy please contact the entity you are providing this form to.

2 Name

Title: Mr Mrs Miss Ms Other

Family name

SEWELL

First given name

JUDITH

Other given names

MARY

3 Date of birth

Day: 09 / Month: 07 / Year: 1947

4 Current postal address

PO Box 115

Suburb/town/locality

BOOMALLING

State/territory

WA
(Australia only)

Postcode

6460
(Australia only)

Country if outside of Australia

5 Daytime phone number (include area code)

0892502144

Section B: Super fund's details

6 Fund name

THE SEWELL SUPERANNUATION FUND

7 Fund Australian business number (ABN)

30 122 196 327

8 Member account number

9 Unique Superannuation Identifier (USI) (if known)

