CMS Superannuation Fund

## PART A

TFN: 752 483 449

## Electronic lodgment declaration (Form P, T, F, SMSF or EX)

This declaration is to be completed where the tax return is to be lodged via an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so.

Privacy
The ATO is authorised by the Taxation Administration Act 1953 to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each partner or beneficiary or entity in our records. It is not an offence not to provide the TFNs. However, you cannot lodge your tax return electronically if you do not quote your TFN.

Taxation law authorises the ATO to collect information and disclose it to other government agencies, including personal information about the person authorised to sign the declaration. For information about privacy go to ato.gov.au/privacy

The Australian Business Register

The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register.

Please refer to the privacy statement on the Australian Business Register (ABR) website (www.abr.gov.au) for further information – it outlines our commitment to safeguarding your details.

Electronic funds transfer - direct debit

Where you have requested an EFT direct debit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your taxation liability from your nominated account.

Tax file number	752	483 449		Year	2020		40
Name of partnership, trust, fund or entity	CMS	Superannuation	Fund				
Alaadaa							

I authorise my tax agent to electronically transmit this tax return via an approved ATO electronic channel. Important

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements

Declaration: I declare that:

- the information provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct, and · the agent is authorised to lodge this tax return
- Signature of partner, trustee or director

Date

PART B

Électronic funds transfer consent

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic lodgment channel.

This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

number	74400004				
Account Name	CMS Superannuation	n Fund BSB:	343001 Acc:	071612031	
I authorise the refund to be d	deposited directly to the specified ac	count.			
Signature	Kobynheck	SIGN HERI	Date	12/0	02/2021
PART D	Tax agent's	certificate (shared	facilities onl	v)	•
Shane Elliott		(		<b>J</b> /	
I declare that:					
· I have prepar · I have receiv correct, and	red this tax return in accordance wit ed a declaration made by the entity	th the information supplied by the that the information provided to	e partner, trustee, director me for the preparation of	r or public officer this tax return is tru	ue and
· I am authoris	ed by the partner, trustee, director	or public officer to lodge this tax	return including any and	iooblo askad I	
Agent's signature		Date	etati, including any appi	icable scriedules.	
				Client reference	CMSSF01
Contact name Mr Shane	e Elliott				
Agent's phone number . 03	97376292		Agent's reference	number 74400	004