

PAYG payment summary – superannuation income stream



You must complete all sections of this form. For help completing this form, visit our website at ato.gov.au/paymentsummaries

Payment summary t	for year ending 30 June 🔲 🛭 🖟		ady sent, place X in this box				
Section A: Payee det	ails						
Tax file number	62 043 542						
Date of birth (if known)	PHER DO DO DO DO DE PORTO DE P		State/territory Postcode				
Death benefit (Reversionary income stream) Is the payee under 60 years of age and a death benefits dependant,							
where the deceased die		it, Yes No X	igina				
Section B: Payment	details Day Month	Year Day	Mouth Aear And Original Landing Control Contro				
Period during which pa		2017 to 30	/06/2078 *				
TOTAL TAX WITHHEL	D\$						
Taxable component Taxed element Untaxed element	\$, , × \$, , ×	Lump sum in arrears – Taxed element Untaxed element	taxable component \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Tax-free component Tax offset amount	\$, , , × \$ ×	Lump sum in arrears – tax-free component	\$, <u></u> ,×				
Name (use the same name the left of the le	ails ust also complete this section nat appears on your activity statement) LAUERAS WPE out your privacy visit our website at ato.gov.au/privacy the information given on this form is complete at ato.gov.au/privacy visit our website at ato.gov	4 540 III RIFUNDI IVACY	or withholding payer number (WPN) Branch number				
Signature of authorised person	FZX	Date Day	Month Year 7				



PAYG payment summary statement



This form is part of the PAYG payment summary annual report. See reverse of page for how to complete this form.

If you report your payment summary information to us electronically, do not complete this form.

Payment summaries printed from payroll software should **not** accompany this form. Use ATO printed payment summary forms.

Print clearly in BLOCK LETTERS with a black pen only. Do not use rubber stamps to show payer details.

Complete and send this form to us by 14 August with the ATO original of the payment summaries issued. Do not use this form if you report using electronic media.

Send your completed form to us at: Australian Taxation Office Locked Bag 50 PENRITH NSW 2740

Do not use rubber stamps to show payer details.								
If you are amending a payment summary statement you have already sent, place X in this box								
Statement for year ending 30 June 2076								
Payer details ABN or withholding payer number 34 540 116 Branch number Branch number								
Name VEHAMELA VERA SUPER FUNDIO I I I I I I I I I I I I I I I I I I								
Address Street number and street name								
Suburb, town or locality State Postcode State State Postcode								
Contact name Contact phone number								
PHILLOUNDER DOB 8279777								
Payment summaries issued								
Payment summary type payment summaries issued Total of gross payments or summaries issued taxable components of tax withheld								
Individual non-business (includes salaries or wages paid to employees) \$ \\ \								
Employment termination payment \$ \\ \\$ \\ \\$ \\ \\$ \\ \\$ \\ \\$								
Superannuation lump sum \$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\								
Superannuation income stream \$ \\ \frac{1}{2} \\ \f								
Business and personal services income \$ \\ \\$ \\ \\$ \\ \\$								
Foreign employment \$ \\ \\$ \\ \\$ \\ \\$								
Privacy - For information about your privacy, visit our website at ato.gov.au/privacy								
Declaration I declare that the information given on this form is complete and correct.								
Signature of authorised person Day Month Year Date 23 / 0 4 / 2 0 7 9								

PAYG Payment Summary - Superannuation Income Stream Payment summary for year ending 30 June 2018

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	е				
DOE					
Payee's given name(s)			=		
CHRISTOPHER JOHN]		
Payee's address					
2 SHIRLEY CRESCENT					
WEST BEACH					
SA 5024]		
Date of birth	20/01/1959		7		
	20/01/1959		J.		
NOTICE TO PAYEE If this payment have to lodge a tax return. If you ha summary, lodging your tax return o	rve aiready lodged your (or an amendment reques	tax return, you may n	ed to lodge an amendment requ	est. For more inf	ormation about this payment
Period of payment 01/07/201	7 to 30/06/2018				
Payee's Tax File Number	562043542		Total Tax Withheld \$		
Taxable component					
Taxed element		\$	•	3,771	7
Untaxed element		\$			1
Toy from company		\$		1,028	1
Tax free component					=
Tax offset amount		\$		565	<u></u>
Lump sum in arrears - taxable co	<u>imponent</u>	\$]
Lump sum in arrears - tax free ox	mponent	\$			
Payer Details					
Payer's ABN or Withholder Pay	er Number		Branch Number		
34540116088					
Payer's Name					
VEHA VELA VERA SUPER	RFUND				
Signature of authorised person					
					Date
					1 1