

# Rollover benefits statement



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035/136

CLEMINSON SUPERANNUATION FUND  
C/- THE MACRO GROUP PO Box 3555  
SOUTH BRISBANE BC QLD 4101



Please keep a copy of this statement for your records.

## Section A: Receiving fund

Australian business number (ABN)	42 141-879-322
Fund name	CLEMINSON SUPERANNUATION FUND
Postal address	C/- THE MACRO GROUP PO Box 3555
Suburb/town/location	SOUTH BRISBANE BC
State/territory	QLD
Postcode	4101
Country	Australia
Unique superannuation identifier (USI)	
Member client identifier	

## Section B: Member's details

Tax file number (TFN)	135-482-037
<b>Full name</b>	
Title	Mrs
Surname	Cleminson
First given name	Margaret
Other given names	Mary
Residential address	35 BARBARA STREET
Suburb/town/location	MANLY WEST
State/territory	QLD
Postcode	4179
Country	
Date of birth	06 November 1960
Daytime phone number	0739010364
Email address (if applicable)	<a href="mailto:cleminson@optusnet.com.au">cleminson@optusnet.com.au</a>

## Section C: Rollover transaction details

Service period start date	13 August 2012
<b>Tax components</b>	
Tax-free component	\$961.29
KiwiSaver tax-free component	\$0.00
Taxable component	
Element taxed in the fund	\$6,395.69
Element untaxed in the fund	\$0.00
<b>Total tax components</b>	<b>\$7,356.98</b>
<b>Preservation amounts</b>	
Preserved amount	\$7,356.98
KiwiSaver preserved amount	\$0.00
Restricted non-preserved amount	\$0.00
Unrestricted non-preserved amount	\$0.00
<b>Total preservation amounts</b>	<b>\$7,356.98</b>

## Section D: Non-complying funds

Contributions made to a non-complying super fund on or after 10 May 2006 \$0.00

## Section E: Transferring fund

Fund Australian business number (ABN)	60 905-115-063
Fund name	QSuper Accumulation account
Contact name	Member Services
Daytime phone number	1300360750
Email address	QSUPER.ATOREPORTING@QSUPER.QLD.GOV.AU

## Section F: Declaration

### 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 the information in the statement to the ATO.

Name	Neil Sheppard
Authorised representative signature	Neil Sheppard
Date	01 February 2021