

# Rollover benefits statement



Central Plaza Three  
70 Eagle Street, Brisbane  
GPO Box 200, Brisbane QLD 4001  
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W [qsuper.qld.gov.au](http://qsuper.qld.gov.au)



038/799

Houghton Superannuation Fund  
5 Oakwood Way  
CARINDALE QLD 4152



Please keep a copy of this statement for your records.

## Section A: Receiving fund

Australian business number (ABN)	83 477-946-767
Fund name	Houghton Superannuation Fund
Postal address	5 Oakwood Way
Suburb/town/location	CARINDALE
State/territory	QLD
Postcode	4152
Country	Australia
Unique superannuation identifier (USI)	
Member client identifier	

## Section B: Member's details

Tax file number (TFN)	489-655-817
<b>Full name</b>	
Title	Mrs
Surname	Houghton
First given name	Karen
Other given names	Lee-Ann
Residential address	5 Oakwood Way
Suburb/town/location	CARINDALE
State/territory	QLD
Postcode	4152
Country	
Date of birth	20 September 1966
Daytime phone number	0732193529
Email address (if applicable)	khoug18@gmail.com

## Section C: Rollover transaction details

Service period start date 02 March 1984

### Tax components

Tax-free component	\$21,294.56
KiwiSaver tax-free component	\$0.00
Taxable component	
Element taxed in the fund	\$56,257.46
Element untaxed in the fund	\$0.00

**Total tax components** \$77,552.02

### Preservation amounts

Preserved amount	\$77,552.02
KiwiSaver preserved amount	\$0.00
Restricted non-preserved amount	\$0.00
Unrestricted non-preserved amount	\$0.00

**Total preservation amounts** \$77,552.02

## 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	29 June 2021