09 July 2018 WIN: 18038346



Member Services Centre 13 43 72

PO Box J 755, Perth WA 6842

■ Facsimile 1800 300 067

gesb.wa.gov.au

BURGER SUPER FUND PO Box 6132 COFFS HARBOUR PLAZA NSW 2450

Member Number: 7906544

Dear Sir/Madam

**Member Name:** 

Mr Stephen Burger

Your Ref:

468040497

As requested, the GESB Superannuation benefit for the above member has been electronically transferred to the bank account details provided for the Self Managed Super Fund.

Please find enclosed a Rollover Benefits Statement showing the taxation components.

If you have any questions, please contact your Member Services Centre on **13 43 72** between 7.30am and 5.30pm (AWST), Monday to Friday, or visit gesb.wa.gov.au to learn more about your super.

Yours sincerely,

James Friend

Manager, Member Services



# **Rollover Benefits Statement**

Sec	tion A : Receiving fund	's details										
1	Australian business number (ABN)		ABN) 49-448-523-246									
2	Fund Name	Burger Super Fund										
3	Postal Address	PO Box 6132										
			-									
	Suburb/town/locality	Coffs Harbour Plaza						State	NSW	Postcode	2450	
	Country if other than Australia							j '				
4	Unique superannuation	identifier (USI)										
	Member client identifier		468040497									
Section B - Member's details												
5	Tax file number (TFN)	628-402-87	6	$\neg$								
6	Full name					,						
Title - fo	for example, Mr, Mrs, Miss, Ms		Surname or family name Burger									
First giv	ven name	Stephen	<del></del> -	Other given names					Mark			
7	Residential address	11 Toba Nook										
								# ·				
	Suburb/town/locality	Wandina						7	WA	7	GE 20	
								State	VVA	Postcode	6530	
	Country if other than Australia							J				
8	Date of birth	10/02/1961 9 Sex (M/F) M										
10	Daytime phone number											
11	Email Address	steveburger@westnet.com.au										
Sec	tion C - Rollover transa	ction details				**			-			
12	Service period start date		11/02/2	2003								
13	Tax Components		1			Preserva	ervation amo	tion amounts				
	Tax-free component	\$	2,500.00 P			Prese	Preserved amount				4,133.36	
	KiwiSaver Tax-free comp	onent \$		0.00			KiwiSaver preserved amount				0.00	
	Taxable component:  Element taxed in the fund  Element untaxed in the fund		1	0.00	Dootsi	Restricted non-preserved		\$	•	0.00		
							Unrestricted non-preserved				0.00	
	TOTAL Tax Components \$					TOTAL Preservation Amounts			\$	<del>_</del>	0.00	
	TOTAL TAX Component	is $\psi$		4,133.30		IUIA	L Preservati	on Amou	nts 🍑		4,133.36	
Sect	tion D: Non-complying	funds							3			
	ontributions made to a non-co											
tu	and on or after 10 May 2006	Ψ			3							
Sect	tion E: Transferring fun	d										
16	Fund's ABN	93-350-173-038										
17	Fund's name	WEST STATE SUPER										
18	Contact name	Member Services										
19	Daytime phone number	92116680										
20	Email Address	memberservices@gesb.com.au										

## Section F - Declaration

## TRUSTEE, DIRECTOR OR AUTHORISED OFFICER DECLARATION:

Complete this declaration if you are the trustee, director or authorised officer of the superannuation fund or other provider shown in section E.

I declare that the information contained in the statement is true and correct

#### Name (BLOCK LETTERS)

Mr Andrew Macleman	
Trustee, director or authorised officer signature	_
Andrew Macleman	DATE 09/07/2018

### Where to send this form

Do not send this form to the ATO

If the rollover data standards **do not apply** to the transaction, you must do all of the following:

send the form to the receiving fund in section A within seven days of paying them the rollover

- provide a copy to the member in section B within 30 days of paying the rollover
- keep a copy in your records for a period of five years

- If the rollover data standards **do apply** to the transaction, you must do the all of the following:

  comply with the requirements of the data standard for the fund-to-fund interaction (do not send this form to the receiving fund in section A)
  - use this form only to provide a statement to the member in section B within 30 days of paying the rollover
  - keep a copy of the member statement in your records for a period of five years