

15 September 2020

BEGS O'Donnell Superfund
23 Mountainview Ave
GWYNNEVILLE NSW 2500

Client ID
10059336

Account number
3612363

Dear Sir/Madam,

Re: Transfer from Australian Catholic Superannuation

We confirm that a payment of \$15131.74 has been made to your Fund's nominated bank account on behalf of our member, Sarah Maree O'Donnell.

Please find enclosed a Rollover Benefit Statement.

Should you require any further information, please contact the Fund Office on 1300 658 776.

Yours sincerely



Scott Kidman
Administration Manager

Rollover benefits statement

Section A: Receiving fund's details

1 Australian business number (ABN) 64 775 653 942

2 Name

BEGS O'Donnell Superfund

3 Postal address

Street address

23 Mountview Ave

Suburb/town/locality

GWYNNEVILLE

State/territory

NSW

Postcode

2500

Country

4a Unique Superannuation Identifier (USI)

4b Member client identifier 002

Section B: Member's details

5 Tax file number (TFN) 430-962-465

6 Full name

Title MRS

Family name

O'donnell

First given name

Sarah

Other given names

Maree

7 Postal address

Street address

23 Mountview Ave

Suburb/town/locality

GWYNNEVILLE

State/territory

NSW

Postcode

2500

Country

8 Date of birth Day / Month / Year 20/02/1982

9 Sex F

10 Daytime phone number 61407341162

11 Email address

sarahc43@hotmail.com

Section C: Rollover transaction details

Day / Month / Year

12 Service period start date

12/11/1998

13 Tax components

Tax-free component

\$8.52

KiwiSaver Tax-free component

\$0.00

Taxable component:

Element taxed in the fund

\$15,123.22

Element untaxed in the fund

\$0.00

TOTAL Tax Components

\$15,131.74

14 Preservation amounts

Preserved amount

\$15,131.74

KiwiSaver preserved amount

\$0.00

Restricted non-preserved amount

\$0.00

Unrestricted non-preserved amount

\$0.00

TOTAL Preservation Amounts

\$15,131.74

Section D: Non-complying funds**15 Contributions made to a non-complying fund**

on or after 10 May 2006

\$0.00

Section E: Transferring fund**16 Fund's ABN**

24680629023

17 Fund's name

The Trustee for Australian Catholic Superannuation and Retirement Fund

18 Contact name

Title

Mr

Family name

Cantor

First given name

Greg

Other given names

19 Email address

ato@catholicsuper.com.au

20 Daytime phone number

02 9715 0000

Section F: Declaration

Complete the declarations that apply to you. Print your full name then sign and date declaration.

Before you sign the declaration, check that you have provided true and correct information. Penalties may be imposed for giving false or misleading information.

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 Greg Cantor

Trustee, director or authorised officer signature



Date

Day / Month / Year

15/09/2020

OR

AUTHORISED REPRESENTATIVE DECLARATION:

Complete this declaration if you are an authorised representative of the superannuation fund or other provider shown in section E.

I declare that:

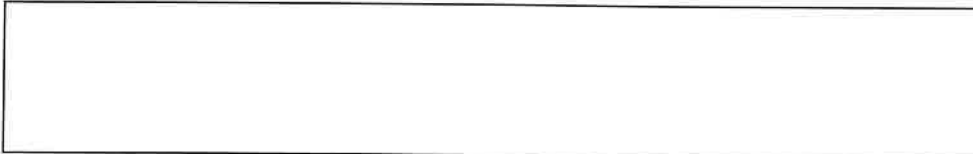
I have prepared the statement with the information supplied by the superannuation provider.

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 (BLOCK LETTERS)

Authorised representative signature



Date

Day / Month / Year

15/09/2020

Tax Agent number

