

Superannuation lump sum pre-payment statement

Warning: This form has been designed to assist you to prepare the Australian Tax Office's Superannuation lump sum pre-payment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

PART 1 – SUPERANNUATION PROVIDER TO COMPLETE

Section A: Superannuation provider details

1 Superannuation fund, ADF, RSA or annuity provider name

TONINI PENSION FUND

2 Postal address

115/11 SPURWAY DRIVE

Suburb/town/locality

NORWEST

State/territory

NSW

Postcode

2153

3 Australian business number (ABN) or withholder payer number

51497046122

4 Authorised contact person

Title:

MRS

Family name

TONINI

First given name

Other given names

LILIANA

5 Daytime phone number (include area code)

0419493526

Section B: Member's details

6 Your full name

Title:

MRS

Family name

TONINI

First given name

Other given names

LILIANA

7 Current postal address

115/11 SPURWAY DRIVE

Suburb/town/locality

NORWEST

State/territory

NSW

Postcode

2153

8 Date of birth

PROVIDED