Rollover Benefits Statement

Complete this form if you are a trustee of a superannuation fund or provider of a retirement savings account (RSA) and any of the following apply:

- You are paying a rollover superannuation benefit, other than a death benefit rollover to another fund or RSA, and you are not already providing all of this information electronically under the rollover data standards.

- You have paid a rollover superannuation benefit to another fund or RSA and are providing a statement about the rollover to your member. to your member.

- You are the trustee of a non-complying fund and are paying member benefits to another superannuation fund or RSA (complete section D instead of section C).

SECTION A: Receiving Fund

Australian business number (ABN) : 40 326-923-327

The Trustee for L&A O'Rourke Investments Fund Name

Postal Address : 66 VALENCIA RD

Suburb/town/locality : CARMEL State/territory : WA : 6076 Postcode

Country (a) Unique superannuation identifier:

(b) Member client identifier

SECTION B: Member's Details

: 207 252 935 Tax File Number(TFN)

Full Name

Mrs Title O'Rourke Family Name First Given Name Amy

Other Given Name(s)

100 BRAIDWOOD DRIVE Residential Address

AUSTRALIND Suburb/town/locality

State/territory WA 6233 Postcode

AUSTRALIA Country 02 / 03 / 1977 Date of Birth : Female : 0438022929

Daytime phone number

: amyraw_77@hotmail.com Email address (if applicable)

SECTION C: Rollover Transaction Details

: 29 / 05 / 1995 Service period start date

Tax Components

\$ 484.29 Tax-free component \$ 0.00 KiwiSaver tax-free component Taxable component \$ 39,515.71 Element taxed in the fund Element untaxed in the fund 0.00

Tax components TOTAL

Preservation amounts

40,000.00 \$ Preserved amount \$ KiwiSaver preserved component 0.00 \$ Restricted non-preserved amount 0.00 0.00 Unrestricted non-preserved amount

> Preservation amounts TOTAL 40,000.00

40,000.00