

Agent DGZ

**Client** CASTLES FAMILY

SUPERANNUATION FUND

ABN 85 636 102 894

## Transfer balance account report

**Transaction ID** 2410657769521

Provider

Name CASTLES FAMILY SUPERANNUATION FUND

**ABN** 85636102894

Supplier

Name B.V GROGAN & S.D GROGAN

**ABN** 20741591824

Contact name MIRANDA EXELBY

Contact phone number 07 41524677

**Event** 

Reporting event Superannuation income stream

 Reported effective date
 01/07/2020

 Value
 \$297,888.47

Member

**Details** 

Tax file number (TFN) 478422611

**Title** Mr

Family name CASTLES
First given name LESTER
Second given name GERARD
Date of birth 14/10/1952

## Address

440 CLAYTON RD ALLOWAY QLD 4670 AUSTRALIA

## Account details

Type Account based income stream

StatusAccount is openAccount numberCASLES00156PClient numberCASTLEST0001

Is this a cancellation of a previous report?

## Declaration

- > I have prepared the statement with the information supplied by the superannuation provider / life insurance company (as applicable)
- > I have received a declaration made by the superannuation provider / life insurance company (as applicable) that the information provided to me for the preparation of this statement is true and correct
- > I am authorised by the superannuation provider / life insurance company (as applicable) to give the information in the statement to the ATO

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