

# 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**

STIELER FAMILY SUPERANNUATION FUND

**2 Postal address**

146 BLOOMFIELD STREET  
CLEVELAND QLD 4163

**3 Australian business number (ABN) or withholder payer number**

22681206614

**4 Authorised contact person**

SHONA LORRAINE SHERMAN

**5 Daytime phone number**

07 32861322

### Section B: Member's details

**6 Full name**

Title MRS

Family Name

STIELER

First given name

Other given names

HEATHER JOAN

**7 Postal address**

28 WISBECH PLACE  
THORNLANDS QLD 4164

**8 Date of birth**

23/06/1954

Section C: Superannuation lump sum payment details

9 Lump sum payment is calculated to this date 30/06/2016

10 Superannuation lump sum components

Taxable component

Taxed element	\$ 5,756.65
Untaxed element	\$
Tax-free component	\$ 1,803.35
KiwiSaver tax-free component	\$
Total amount	\$ 7,560.00

11 Preservation amounts of the superannuation lump sum

Preserved amount	\$
Restricted non-preserved amount	\$
Unrestricted non-preserved amount	\$ 7,560.00
Total amount	\$ 7,560.00

Section D: Superannuation provider's signature

12 Date the statement is issued to the member / /

13 Member is to return statement by / /


14 Superannuation fund's, ADF's, RSA's or annuity provider's signature

Date / /

Section E: Cash amount

1 Pay me a gross cash amount of: \$ 7,560.00

I understand that this amount  
may be subject to tax

 You may wish to speak with a tax professional or your superannuation fund, ADF, RSA or annuity provider to make sure you are aware of your tax obligations and superannuation roll over options.

Section F: Rollover payment

2 Roll over my payment to: (provide the full name of fund, RSA or annuity provider)

3 Fund ABN

4 Superannuation fund, ADF, RSA or annuity provider postal address:

5 Member account number

6 Roll over an amount of: \$

Section G: Member's declaration

*I authorise my superannuation lump sum to be paid as instructed on this statement.*

HEATHER JOAN  
STIELER

Signature

Date 

/ /

Give this completed statement to your super fund. You should keep a copy for your records for a period of five years.

# PAYG Payment Summary - Superannuation Lump Sum

## Payment summary for year ending 30 June 2016

Warning: This form has been designed to assist you to prepare the Australian Tax Office's PAYG Payment Summary Statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

### Payee Details

Payee's surname or family name

STIELER

Payee's given name(s)

HEATHER JOAN

Payee's address

28 WISBECH PLACE

THORNLANDS QLD 4164

Date of birth

23/06/1954

**NOTICE TO PAYEE** If this payment summary shows an amount in the total tax withheld box, you must lodge a tax return. If no tax was withheld, you may still have to lodge a tax return. If you have already lodged your tax return, you may need to lodge an amendment request. For more information about this payment summary, lodging your tax return or an amendment request, you can : - visit [www.ato.gov.au](http://www.ato.gov.au) - refer to TaxPack - phone 13 28 61

Date of payment

30/06/2016

Payee's Tax File Number

487898270

Total Tax withheld

\$

### Taxable component

Taxed element

5,756

Untaxed element

Tax free component

1,803

KiwiSaver tax-free component

Death benefit

Type of death benefit

### Payer Details

Payer's ABN or Withholder Payer Number

22681206614

Branch Number

Payer's Name

STIELER FAMILY SUPERANNUATION FUND

Signature of authorised person

Date

/ /