

1 December 2020

Mr David A Taylor
3 William St
AVALON BEACH NSW 2107

FirstChoice Personal Super
Account number: 0100 0818 8771

Your rollover has been completed

Dear Mr Taylor

We enclose the following information for your records:

- A statement confirming the details of your rollover
- A rollover advice statement which was also sent to your nominated fund(s)

From listening to our investors we know that superannuation can be complex and confusing, so we have put together an information sheet to help you. It outlines some implications of withdrawing from super that you may not be aware of. To get a copy of 'Things to watch for when you withdraw funds or rollover' please call us or download a copy from our website colonialfirststate.com.au.

Need more information?

If you would like to discuss this, please contact your financial adviser or call us on 13 13 36, Monday to Friday, 8am to 7pm, Sydney time.

Yours sincerely

A handwritten signature in black ink, appearing to be 'S Henricks', with a stylized, cursive script.

Scott Henricks
General Manager Client Operations

ROLLOVER CONFIRMATION
Colonial First State FirstChoice Personal Super

Mr David A Taylor

Account number: 0100 0818 8771

Rollover summary

Date of rollover	27 November 2020
Rollover amount	\$60,000.00
Rollover amount	\$60,000.00

Investment option details

Investment option	Units withdrawn	Unit price \$	Refund amount \$	Withdrawal amount \$
FirstChoice High Growth	23,672.3743	2.5346	\$0.00	\$60,000.00
Total rollover amount				\$60,000.00

Tax details

The tax components of your rollover were:

Taxable	\$60,000.00
Total	\$60,000.00

Current investment summary as at 27 November 2020*

Investment option	Unit balance	Unit price \$	Current value \$
FirstChoice High Gro	8,953.8832	2.5346	\$22,694.51
Total investment value			\$22,694.51

*The account balance may vary if more than one transaction occurred on the effective date.
Change of details to your account may also vary where more than one change was made on the day.

Non-lapsing death benefit nomination

Your nomination details tell us who you would like to receive your investment in the event of your death.

Person nominated	Date of birth (of nominee)	Relationship	Percentage of benefit (%)
Karen Julia Taylor	18 September 1968	Spouse	80.00%
Bayley Isabelle Taylor	7 October 2004	Child	20.00%

Please note this nomination remains in force unless you revoke or make a new nomination in writing by completing a new Non-Lapsing Death Benefit Nomination Form. You should regularly review your nomination(s) to ensure it accurately reflects your wishes and your personal circumstances.

Tax File Number	Supplied
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Future investment selection details

The investment allocation shown below will be used for all future transactions unless you tell us otherwise. This means any additional contributions you make to your account will be invested in line with the allocation outlined below.

Investment option(s)	% Allocation
FirstChoice High Grt	100.00

If your account includes a suspended, restricted or unavailable option, we will invest that allocation into an alternative option.

Certain options are excluded from your future investment selection. For further information please refer to the 'Other information you need to know' section of the Product Disclosure Statement available on our website, contact us or speak to your financial adviser.

To change your future investment selection, please log in to FirstNet and select Investment allocation or call us. We recommend you speak to your financial adviser before making any changes to your account.

Rollover Benefit Statement

Individual's copy

t0001297h-0142287-0000039

SECTION A: RECEIVING FUND'S DETAILS

Australian business number (ABN):

96451730350

3 William St

AVALON BEACH

NSW 2107

Unique Superannuation Identifier (USI):

Member client identifier:

TAYLORD

SECTION B: MEMBER'S DETAILS

Tax file number (TFN):

159295666

Title:

Mr

Family name:

Taylor

Given name:

David

Other given names:

Alan

Residential address:

3 William St

Suburb/town:

AVALON BEACH

State/territory:

NSW

Postcode:

2107

Country if other than Australia:

Date of birth:

18/10/1968

Sex (M/F):

M

Daytime phone number (including area code):

(02) 9918 7568

Email address (if applicable):

dtaylor@shelmerdines.com.au

SECTION C: DEATH BENEFIT ROLLOVER TRANSACTION DETAILS

Income stream taxation indicator:

TFN of deceased member:

Full name of deceased member:

Title:

Family name:

First given name:

Other given names:

Date of birth of deceased member:

Service period start date:

01/07/1993

Tax components:

Preservation amounts:

Tax-free component

\$0.00

Preserved amount

\$60,000.00

KiwiSaver Tax-free component

\$0.00

KiwiSaver preserved amount

\$0.00

Taxable component

Restricted non-preserved amount

\$0.00

⌘ Element taxed in the fund, and

\$60,000.00

Unrestricted non-preserved amount

\$0.00

⌘ Element untaxed in the fund

\$0.00

TOTAL Preservation Amounts

\$60,000.00

TOTAL Tax Components

\$60,000.00

SECTION D: DEPENDENT CHILD DEATH BENEFIT ROLLOVER DETAILS

Value of interest at member's death:

Retirement phase:

Accumulation phase:

% share of above for this dependant

SECTION E: TRANSFERRING FUND

ABN:

Fund's name:

Contact name:

Telephone no:

SECTION F: DECLARATION

I declare that the information contained in the statement is true and correct.

Name:

Signature of authorised person:



Date:

Rollover Benefit Statement

Roll-over fund copy

t0001297h-0142287-0000039

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AVALON BEACH

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Other given names:

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