

EMPLOYER CONTRIBUTION CONFIRMATION

FUND NAME:

_____ Payne Superannuation Fund _____

YEAR ENDED:

30 June 2020

Employer contributions banked direct to fund bank account : \$ 3 705.00

(ABN 16 579 299 461)

Expenses paid direct by Employer to be treated as contributions \$ _____

Total employer contributions : \$ 3 705.00

Allocation of Contributions paid towards each member is as follows:

Name	Employer Contribution (excluding SGC)	SGC Component	Total Contribution
1. <u>Jodie Corbett</u>	_____	<u>3 705.00</u>	<u>3 705.00</u>
2. _____	_____	_____	
3. _____	_____	_____	
4. _____	_____	_____	
Total	\$ _____	\$ <u>3 705.00</u>	\$ <u>3 705.00</u>

I, the undersigned, being the relevant member / accountant (please circle applicable position), of the above Fund, confirm that the information above is a correct account of the contributions made during the year ended 30 June, 2020.

SIGNED:



Dated: 13 / 05 / 2021