



29 June 2022



To the Manager
Killamaz Super Fund
Unit 2 116 Tudor St
HAMILTON NSW 2303

Your contacts

E askamp@amp.com.au

W amp.com.au

T 133 888

AMP Limited
PO Box 300 PARRAMATTA NSW 2124

Your details

ACCOUNT NAME

Marion Byrne

ACCOUNT NUMBER

926027825

MONTH AND YEAR OF BIRTH

Not supplied

Rollover from SignatureSuper®

Withdrawal number: 283825946

The following information relates to a payment from SignatureSuper account 926027825 in the name of Marion Byrne.

Member name	Payment details	Amount \$
Marion Byrne	EFT ***** - ****03333	1,239,427.78

Enclosed documents

We have enclosed a **Rollover Benefit Statement** for your records.

We're here to help

If you have any questions, please contact us.

Yours sincerely,

Steve Vaid
Director Client Services

What you need to know

This document is provided by N.M. Superannuation Proprietary Limited, ABN 31 008 428 322, AFSL No. 234654 which is the trustee of the AMP Super Fund, ABN 78 421 957 449.



Rollover Benefit Statement

Original

SECTION A: RECEIVING FUND'S DETAILS

Australian business number (ABN):	<input type="text" value="65422452058"/>
Name:	<input type="text" value="Killamaz Super Fund"/>
Address:	<input type="text" value="Unit 2 116 Tudor St"/> <input type="text" value="Hamilton NSW 2303"/>
Unique Superannuation Identifier (USI)	<input type="text"/>
or	
Member client identifier:	<input type="text" value="M BYRNE"/>

SECTION B: MEMBER DETAILS

Tax file number:	<input type="text" value="137884233"/>
Title:	<input type="text" value="Mrs"/>
Family name:	<input type="text" value="Byrne"/>
Given name:	<input type="text" value="Marion"/>
Other given names:	<input type="text"/>
Postal address:	<input type="text" value="20 Amber Way"/> <input type="text" value="GLENDALE NSW 2285"/>
Date of birth:	<input type="text" value="01/11/1962"/>
Sex:	F <input checked="" type="checkbox"/> M <input type="checkbox"/>
Daytime phone number (include area code):	<input type="text"/>
Email address (if applicable):	<input type="text"/>

SECTION C: ROLLOVER TRANSACTION DETAILS

1. Service period start date	<input type="text" value="16/09/1989"/>
2. Tax components	
• Tax - free component	<input type="text" value="255,288.35"/>
• KiwiSaver Tax-free component	<input type="text" value="0.00"/>

SECTION C: ROLLOVER TRANSACTION DETAILS (CONT)

• Taxable component	
<input type="checkbox"/> Element taxed in the fund, and	984,139.43
<input type="checkbox"/> Element untaxed in the fund	0.00
TOTAL Tax Components	1,239,427.78

3. Preservation amounts

• Preserved amount	0.00
• KiwiSaver preserved amount	0.00
• Restricted non-preserved amount	0.00
• Unrestricted non-preserved amount	1,239,427.78
TOTAL Preservation Amounts	1,239,427.78

SECTION D: NON-COMPLYING FUNDS

Contributions made to a non-complying fund on or after 10 May 2006	
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SECTION E: TRANSFERRING FUND

ABN:	78 421 957 449
Fund's name:	AMP Super Fund
Contact name:	Steve Vaid
Email address (if applicable):	
Daytime phone number (including area code):	133 888

SECTION F: DECLARATION

I declare that:

- ☐ I have prepared the statement with the information supplied by the superannuation provider.
- ☐ I have received a declaration made by the superannuation provider that the information provided to me for the preparation of this statement is true and correct.
- ☐ I am authorised by the superannuation provider to give the information in the statement to the ATO.

Signature of authorised person:	Steve Vaid
Date:	29/06/2022