



22 October 2018



Mrs Denise Savaidis
PO Box 80
WHYALLA SA 5600

Your contacts

MICHAEL CHAMBERS
0882941600
michael.chambers711@gmail.com
E askamp@amp.com.au
W amp.com.au

T 1300 300 798 **F** 03 8688 5799

Customer Service
PO Box 14330 Melbourne VIC 8001

Your details

ACCOUNT NAME

Denise Savaidis

POLICY NUMBER

9414,952/3

Dear Mrs Savaidis,

Important information - documents enclosed

Retirement Security Plan

Life insured name(s): Mrs DENISE SAVOIDIS

We're here to help

Thank you for choosing AMP to help you own your tomorrow. If you have any questions, please contact us or talk to your financial adviser.

Yours sincerely,

Craig Dainton
Director Operations

What you need to know

This document does not take into account your financial situation, objectives and needs. It is important you consider these matters before making any investment decision based on the information contained in this document. Any advice in this document is provided by N.M. Superannuation Proprietary Limited, ABN 31 008 428 322, AFSL No. 234654, which is part of the AMP group of companies. N.M. Superannuation Proprietary Limited is the trustee of the National Mutual Retirement Fund, ABN 76 746 741 299, of which this account is a part.

Rollover benefits statement

Section A - Receiving fund		THIS FORM DOES NOT HAVE TO BE INCLUDED IN A TAX RETURN	
PETEL SUPER FUND-SAVAIDIS PO BOX 755 NORTH ADELAIDE SA 5006		Australian business number(ABN)	58711297956
		Member client identifier	
		Unique Superannuation Identifier(USI)	
Section B - Member's details			
Full name			
Title: Mr, Mrs, Miss, Ms	MRS	Family name	SAVAIDIS
First given name	DENISE		
Other given names			
Address	PO BOX 80		
Suburb/town	WHYALLA	State/Territory	SA
		Postcode	5600
Date of birth	28 / 12 / 1962	Sex(M/F)	F
		Tax File Number (TFN)	587414751
		Daytime phone number	
Email address (if applicable)			
Section C - Rollover transaction details			
Service period start date	30 / 7 / 1986		
Tax components		Preservation amounts	
Tax-free component	\$ 1000.00	Preserved amount	\$ 0.00
KiwiSaver Tax-free component	\$ 0.00	KiwiSaver preserved amount	\$ 0.00
Taxable component		Restricted non-preserved amount	\$ 0.00
Element taxed in the fund	\$ 4097.09	Unrestricted non-preserved amount	\$ 5097.09
Element untaxed in the fund	\$ 0.00	TOTAL Preservation amounts	\$ 5097.09
TOTAL Tax Components	\$ 5097.09		
Section D - Non-complying funds			
Contributions made to a non-complying fund on or after 10 May 2006	\$ 0.00		
Section E - Transferring fund		Fund's ABN	76746741299
Fund's name	NM RETIREMENT FUND		
Contact name	CUSTOMER SERVICE CENTRE	Phone number	132 987
Email address (if applicable)	client.inquiry@amp.com.au		
Section F - Declaration			
TRUSTEE, DIRECTOR OR AUTHORISED OFFICER DECLARATION: I declare that the information contained in the statement is true and correct.			
Trustee, director or authorised officer signature	CRAIG DANTON	Date	19 / 10 / 2018
The original of this form must be sent to the rollover fund within 7 days of paying the rollover payment. A copy must be kept for payee records and a copy given to the person on whose behalf the rollover is made within 30 days of the rollover payment.			
U1JPT /ODVIC /9414,952/3			

PAYE CALCULATION WORKSHEET

PAGE 1 OF 2

REFERENCE:					
BRANCH:	VIC	BUSINESS:	PB	USER ID:	UIJPT
CONTACT NAME:					
CONTACT DEPT:				PHONE:	
PLAN:	ODVIC			MEMBER NUMBER:	9414,952/3
CALC DATE:	2018/10/19			UNIQUE SUPER ID:	
VERSION:	0198			PAYMENT OR QUOTE:	R
TAX FILE NUMBER:	YES			STP PRINTED:	YES
				GROUP CERT NUMBER:	
				MEDICARE LEVY%:	2.000

MEMBER DETAILS

TITLE:	MRS	BIRTH DATE:	28/12/1962
FAMILY NAME:	SAVAIDIS	GIVEN NAMES:	DENISE MARIE
PLAN/FUND NAME:			
PLAN/POLICY NUMBER:		DATE JOINED POLICY FUND:	00/00/0000
DATE JOINED COMPANY:	30/07/1986	DATE JOINED FUND:	30/07/1986
NORMAL RETIREMENT DATE:	28/12/2022	DATE LEFT FUND:	19/10/2018
END OF SERVICE DATE:	19/10/2018	DATE OF DEATH:	
FUTURE UNEXP SERVICE:	0	DAYS SERVED ON DEATH:	0
ELIGIBLE SERVICE DAYS:	11770	DAYS TO RETIRE ON DEATH:	0
		EFF ELIG SERV START:	30/07/1986
TYPE OF BENEFIT:	WITHDRAWAL		
BENEFIT AMOUNT:	\$5,097.09	TAX-FREE COMPONENT:	\$1,000.00
PRESERVED:	\$0.00	KIWISAVER TAX-FREE COMPONENT:	\$0.00
KIWISAVER PRESERVED AMOUNT:	\$0.00	TAXABLE COMPONENT:	
RESTRICTED NON-PRESERVED:	\$0.00	ELEMENT TAXED	\$4,097.09
UNRESTRICTED NON-PRESERVED:	\$5,097.09	ELEMENT UNTAXED	\$0.00

RECIPIENT DETAILS

TITLE:	MRS	BIRTH DATE:	28/12/1962	AGE AT PAYMENT:	55
FAMILY NAME:	SAVAIDIS	GIVEN NAMES:	DENISE MARIE		
ADDRESS:		TAX FILE NUMBER:	587414751		
	PO BOX 80	PIN CODE NUMBER:	5600		
	WHYALLA				
DATE OF PAYMENT:	19/10/2018	DATE FIRST JOINED FUND:	30/07/1986		

AGE THRESHOLD:	55
BENEFIT THRESHOLD AMOUNT:	\$0.00
POST 83 CASH:	\$0.00
INSURANCE COMPONENT OF DEATH BENEFIT:	NO
DEDUCTION CLAIMED BY TRUSTEE:	NO

NOTES

PAYEI000 - PROCESSING COMPLETED SUCCESSFULLY
PAYEI000 - PROCESSING COMPLETED SUCCESSFULLY

