

Ambulance Officers regular superannuation contributions



Super SA



(including all SA Ambulance Service Superannuation Scheme members)

3. My compulsory contributions

Select your compulsory superannuation contributions

Important If you are making compulsory contributions as an operational employee, should you change to an employment arrangement where no compulsory contributions are required (eg casual operational), any contributions you continue to make will become voluntary, unless you elect to change/cancel them.

Triple S and Select members

You may only select one of these options for your compulsory superannuation contributions.

- 5.3% before-tax (salary sacrifice)
- 4.5% after-tax
(This includes contributory members that have transferred from the SA Ambulance Service Super Scheme that are under 60.)
- Do not change my compulsory contribution

The below members are not required to make compulsory contributions.

- Former member of the SA Ambulance Service Super Scheme and over the age of 60.
- Casual operational employee only.

SA Ambulance Service Super Scheme members

You may only select one of these options for your compulsory superannuation contributions.

- 5.9% before-tax (salary sacrifice)
- 5% after-tax
- Do not change my compulsory contribution.

The below members are not required to make compulsory contributions.

- Contributory member over the age of 60
- Non-contributory member

Please complete section 4 or 5 if you wish to make any additional contributions to your superannuation.

Note - All options are a percentage of your superannuation salary, if you do not choose an option above then no change will be made to your compulsory contributions.

4. Start, change or cancel my voluntary salary sacrifice contributions

Note - This is in addition to the compulsory contributions listed in section 3.

Important - Tax and limits

Triple S members

Although there is no limit to the amount of employer and salary sacrifice contributions you make to your Triple S account, there is a limit to the amount that will be taxed concessional on exit.

For more information refer to the Triple S Reference Guide at supersa.sa.gov.au.

Super SA Select SA and Ambulance Service Super Scheme members

If you direct contributions into a Super SA Select or the SA Ambulance Service Super Scheme account, you have an annual concessional contributions cap that applies to all employer and salary sacrifice contributions. For more information refer to the relevant Reference Guide at supersa.sa.gov.au.

OPTION A: Salary sacrifice a set \$ dollar amount each fortnight

Amount of salary sacrifice contribution each fortnight \$

In words, please write out this amount in full:

OPTION B: Salary sacrifice a set % each fortnight

Percentage of earnings each fortnight as a salary sacrifice contribution %

In words, please write out this percentage in full:

OPTION C: Cancel my voluntary salary sacrifice arrangement. I no longer want to make voluntary salary sacrifice contributions.

Please ensure you account for all other deductions, including compulsory contributions, before submitting your request. You need to ensure that you do not elect to contribute an amount greater than your take home pay.

5. Start, change or cancel my voluntary after-tax contribution

Note - This is in addition to the compulsory contributions listed in section 3. However, the percentage needs to be a whole percentage.

Important - You can choose any percentage of after-tax contributions that you wish to make. However, your total after tax contributions must be a whole number when you combine section 5 with any compulsory contributions in section 3. After-tax contributions are based on a percentage of your salary before tax. For more information refer to the Triple S Reference Guide at supersa.sa.gov.au.

I elect to have an additional amount of % of my gross salary paid as after-tax contributions to my superannuation.

OR

Cancel my voluntary after-tax contributions to my superannuation.

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6. Employee Declaration

I declare that the statements above are true and correct and understand

- that the election will remain in force until I notify my employer in writing of any further changes.
- By signing this agreement, I am authorising my employer to contribute on my behalf into my nominated Superannuation scheme. These contributions will be deducted by my employer from either my after-tax or before-tax salary, depending on my instructions, for each relevant pay period.
- an administration fee of \$44 including GST is payable to my employer from my after-tax salary at the commencement of this agreement (salary sacrifice only) and that it is deducted from my first salary sacrifice contribution. I permit Payroll to deduct this amount from my salary. No administration fee applies in relation to after-tax contributions.
- if I wish to change the amount or percentage of my salary sacrifice contribution (if applicable) or if I change agencies, I will need to enter into a new Agreement at an additional cost of \$44.
- The salary sacrifice agreement (if applicable) is an arrangement between myself and my Employer.
- It is my responsibility to monitor whether my concessional and non-concessional contributions (employer contributions plus salary sacrifice contributions) exceed any caps that could apply to my scheme.
- the relevant Reference Guide is available on the Super SA website and am aware of any tax payable on exit. Contributions to Triple S and SA Ambulance Service Superannuation Scheme will not count towards the First Home Super Saver (FHSS) Scheme.
- Any concessional contributions made to Triple S will be counted towards my concessional contributions cap where I am also receiving concessional contributions in a taxed super fund. Even though I cannot exceed this cap as a result of concessional contributions made to Triple S, any additional concessional contributions to a taxed fund could result in me exceeding the cap. I acknowledge that I can find more information about tax in super in the Triple S Tax fact sheet and on the ATO website.
- If I elect to make contributions via a salary sacrifice arrangement these contributions are preserved until I retire after my preservation age, unless I die or become permanently disabled or terminally ill.
- By signing below, I will indemnify my employer and Triple S, Super SA Select or SA Ambulance Service Super Scheme from and against:
 - Any income tax or any other taxation liability whatsoever (including any administrative penalty, fine or other amount) that may become payable pursuant to any relevant taxation legislation and rulings, and
 - Any other liability whatsoever not otherwise described above, in respect of the contributions by my employer, which includes any information supplied by my employer including but not limited to any estimate of total annual earnings and the amount of the contributions and any matter not otherwise described herein, and
 - All charges, costs, damages, disbursements, fees, losses suffered or incurred by my employer in relation to any matter associated with the contributions by my employer.

Financial Advice Certification (Form 9)

I, the person named on the first page, hereby acknowledge that any financial advice required to inform or support my decision to salary sacrifice is solely my responsibility and any such advice must be obtained independently from my employer or my selected nominee.

Signature

Date / /

7. Employer Declaration

This section needs to be signed by your employer's salary sacrifice delegate

Important - Super SA must approve any changes to Compulsory Contributions or any Triple S After Tax contributions. Approval can be obtained by emailing agency@sa.gov.au and attaching a copy of this form.

The employer agrees and acknowledges as follows (select 1):

- That upon the employee signing and delivering this Agreement to the employer, the employer will commence making the deductions and contributions for salary sacrifice only from the next pay period in which the agreement is processed, as outlined in the Employee Declaration (section 6).
- On behalf of the employer, I hereby acknowledge and agree to terminate the salary sacrifice of superannuation by the employee listed on the second page of this form.

Employer salary sacrifice delegate information:

Name

Role

Phone

Email address

Signature

Date / /

Once this form is completed and signed by the member and employer the form is to be sent to: SAASPayrollDoc@sa.gov.au

8. Payroll Action (Payroll use only)

Date payroll actioned / / Deductions commence PPE