

Form > Super SA > Flexible Rollover Product ONE OFF CONTRIBUTION FORM

> 1

**SUPER SA**
contributing to your future

Please complete all the details on this form in **BLOCK LETTERS** using a **BLACK PEN** and return the signed original to **Super SA**.

1. Personal Details

Account ID

Mr Ms Miss Mrs Dr Prof

Surname

Given name(s)

Residential Address

Postcode

Postal Address (if different from above)

Postcode

Date of birth / / Male Female

Email*

Telephone* (M)

(W)

(H)

*By providing your email address and/or telephone number(s) you are agreeing to receive, from Super SA, or an organisation on behalf of Super SA, marketing communications including newsletters, announcement, invitations or surveys. You may opt out of these marketing communications at any time by updating your communication preferences in our online member portal or by contacting Super SA. If you opt out of marketing communications, you will still receive any important account information from us.

You are only required to complete this form if:

- you are age 65 and over
- or
- your spouse is making an Eligible Spouse Contribution (ESC) to your account.

Note: if you are under age 65 or not making an ESC then you are not required to complete a form when making a one off contribution into your super.

2. Personal Contribution

I wish to contribute the amount of \$ _____.

(Minimum \$1,500 for establishing a Flexible Rollover Product Account. Minimum of \$1,000 for additional contributions once an account has been established.)

- A cheque accompanies this form. Cheques should be made payable to "Super SA Flexible Rollover Product".
- I have made a personal contribution payment using BPAY®. **For a personal contribution use Super SA Flexible Rollover Product Biller code 31575.**

In order to make a personal contribution over the age of 65 you must meet the following conditions:

- I am over the age of 65 and under the age of 75; **and**
 - In the current financial year I was gainfully employed for at least 40 hours in a period of 30 consecutive days; **or**
 - I was gainfully employed in the previous financial year for at least 40 hours in 30 consecutive days, I am not gainfully employed in the current financial year and my 'Total Super Balance'¹ is less than \$300,000.

¹ 'Total Super Balance' is the total balance of all your super accounts at the start of the current financial year.

If you do not meet the conditions above then you are not eligible to contribute. Please contact Super SA for further information.

If you wish to claim a personal superannuation deduction for this contribution, you will need to complete and lodge a *Notice of Intent to Claim or Vary a Deduction for Personal Super Contributions* form, available from www.ato.gov.au.

To make an eligible spouse contribution, please complete section 3 over the page.

Contact Us

In person:

Ground floor, 151 Pirie Street
Adelaide SA 5000
(Enter from Pulteney Street)

Postal: GPO Box 48, Adelaide, SA 5001

Call: (08) 8207 2094
or 1300 369 315 (for regional callers)

Email: supersa@sa.gov.au

Website: www.supersa.sa.gov.au



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>2



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Please complete all the details on this form in **BLOCK LETTERS** using a **BLACK PEN** and return the signed original to **Super SA**.

3. Eligible Spouse¹ Contribution

Please complete this section if you want to make an eligible spouse contribution to your spouse's account.

My spouse wishes to contribute the amount of \$ _____ to my Super SA Flexible Rollover Product Account.

(Minimum \$1,500 for establishing a Spouse Account. Minimum of \$1,000 for additional contributions once an account has been established.)

A cheque accompanies this form.
Cheques should be made payable to: "Super SA Flexible Rollover Product".

My spouse has made a spouse contribution payment using BPAY®.

**For a spouse contribution use Super SA Flexible Rollover Product Spouse Account
Biller code 31567.**

To receive an Eligible Spouse Contribution you must meet **one** of the following conditions:

I am under the age of 65

OR

I am over the age of 65 **and** under the age of 70

In the current financial year I was gainfully employed for at least 40 hours in a period of 30 consecutive days; **or**

I was gainfully employed in the previous financial year for at least 40 hours in 30 consecutive days, I am not gainfully employed in the current financial year and my 'Total Super Balance'² is less than \$300,000.

If you are unable to meet one of the above criteria then you are not be eligible to receive an eligible spouse contribution. Please contact Super SA for more information.

4. Investor Declaration

- I declare that the information I have provided on this form is true and correct.
- I understand that my contribution and any eligible spouse contribution will be invested in the Super SA Flexible Rollover account according to the specified investment option.
- If I wish to change my investment option I will complete an *Investment Choice* form.
- I understand that this contribution is preserved and generally cannot be cashed until age 65 or genuine retirement after I reach my Commonwealth Government preservation age.

Signature: **X**

Date: / /

¹ For a partner to be declared a spouse of a member, they need to be declared a putative spouse under the *Southern State Superannuation Act 2009* (conditions apply).

In general terms, the person must have been living as husband and wife de facto (or with the distinguishing characteristics of a married couple in the case of same sex couples) with the member and have either:

- lived continuously with them for a period of three years, or
- lived with them for an aggregate of three out of four years, or
- had a child born of the relationship of whom both are the parents.

A person will also be recognised as a putative spouse of a member if in a Registered Relationship with the member (within the meaning of the *Relationships Register Act 2016*).

² 'Total Super Balance' is the total balance of all your super accounts at the start of the current financial year.