Consolidate your Super



4. Select 'Super' and then 'Manage'.



Please complete all the details on this form in **BLOCK LETTERS** using a **BLACK PEN** and return to Super SA via post or email.

ONLY complete this form if you have super contributions in one or more other Australian super funds and you would like to roll them into Super SA. If you are looking to consolidate from more than one fund, please complete a separate form for each fund.

1. Go to my.gov.au.

(!) You can also do this easily online through the Australian Taxation Office (ATO):

amily Name Other/previous names Sate of birth Contact phone number Tax file number Tax file number mail address² treet address Uburb State Postcode revious street address (if you know that the address held by your FROM fund is different to your current residential address, please give details below) uburb State Postcode 2. Your other fund details ROM: Fund's name (give us the fund's details and we'll contact them for you) Other super fund und name		 Log in or create an account. Link your myGov account to the ATO. 	5. Select 'Transfer super' appear if you have more	
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und phone number Australian business number (ABN)	Fund name			
und phone number Australian business number (ABN)				
	Fund phone number	Membership or account number	Australian business numb	er (ABN)

Note: If you wish to leave a specific \$ balance in your other fund then you must arrange this with them. It cannot be coordinated by Super SA.

¹You are not obliged to disclose your tax file number, but there may be tax consequences.

(I want to roll over the entire amount in the account)

This is a full rollover

²Your email address and/or phone number may be used by Super ŚA (or an organisation on behalf of Super SA) to send you marketing communications and provide you with important information about your superannuation. In addition, if you sign up for the member portal, you will also have online and secure access to your superannuation information. You may opt out of marketing information and electronic and/or online communications by updating your communication preferences in the online portal, or by contacting Super SA. If you do so, you will still receive important account information from Super SA.



processed if you do not include the USI.

This is a partial rollover

(I want to transfer a nominated amount)

Australian business number (ABN)

Please specify the dollar amount

The USI should be listed on your fund's website. If not, contact your fund for details. Your form may not be

.00

Electronic Service Address (ESA)

Self-managed super fund (SMSF)

SMSF name

PLEASE TICK

WHICH APPLIES:

Consolidate your Super





Please complete all the details on this form in **BLOCK LETTERS** using a **BLACK PEN** and return to Super SA via post or email.

3. Your current Super SA product Tick which Super SA product you belong to. This is where your super wi	ill so.	
Tick which Super SA product you belong to. This is where your super wi	iii go:	
Triple S – ABN 40 651 037 780 / USI 40651037780001	SA Ambulance Service ³ – ABN 81 557 964 989 / USI 81557964989001	
Lump Sum ³ – ABN 27 987 187 927 / USI 27987187927002	PSS ³ – ABN 57 597 791 972 / USI 57597791972999	
Pension ³ – ABN 27 987 187 927 / USI 27987187927001	Super SA Select - ABN 98 513 958 004 / USI 98513958004001	
Flexible Rollover Product - ABN 11 635 839 852 / USI 11635839852001		
Note : If you wish to leave a specific \$ balance in your other fund then you must arrange	this with them. It cannot be coordinated by Super SA.	
? 3Any amount rolled into these products cannot be transferred out to an amployment. The rolled in amount will be subject to Commonwealth Programment.	nother superannuation fund until you cease State Government	
employment. The rolled in amount will be subject to Commonwealth Pr	reservation Rules.	
4. Authorisation By signing this request form I am making the following state	montre	
by signing this request form I am making the following state	ements:	
 I acknowledge that Super SA may verify my details with the ATO (Australian Taxation Office) in order to process this request. 	 I accept that my roll in will go into the same investment option that my current Super SA contributions are invested in. 	
I declare I have fully read this form and the information completed is true and correct.	 I request and consent to the transfer of my super as described on page 1 and authorise the super provider of each fund to give effect to this transfer. 	
 I am aware I may ask my super provider for information about any fees or charges that may apply, or any other information about the effect this transfer may have on my benefits, and do not require any further information. 	 I understand that the amount transferred to Super SA is subject to Commonwealth preservation rules and that the products denoted by the footnote in Section 3 of this form cannot be rolled out of 	
 I discharge the super provider of my from fund of all further liability in respect of the benefits paid and transferred to Super SA. the Super SA product to another superannuation fund unterproduct fund		
Full Name		
Signature Date	e D D / M M / Y Y Y	
All you need to do now is provide us with your signed Conse EMAIL supersa@sa.gov.au, or We'll advise you when the transfer is complete.	olidate your Super form by: POST to GPO Box 48, Adelaide SA 5001	

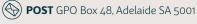
Contact us

EMAIL supersa@sa.gov.au, or

WEBSITE supersa.sa.gov.au



PHONE 1300 369 315





(MEMBER CENTRE (by appointment only) 151 Pirie St Adelaide SA 5000