

Easy Rollover Form



Please send this completed form to:

Mercy Super
PO Box 8334, WOOLLOONGABBA QLD 4102

Phone: 1300 368 891 or (07) 3163 8867

Email: information@mercysuper.com.au

Before signing this form to transfer your superannuation benefits from your previous superannuation fund to Mercy Super, you should ask your previous fund for all information about your benefits in that fund (including transfer, exit, or other fees, insurance cover and the available investment options) that you need to understand the effects of transferring these benefits.

*** Indicates mandatory field. If you do not complete all the mandatory fields, there may be a delay in processing your request. Please complete in a black or blue pen and BLOCK letters. This form is invalid if the Authorisation section is not signed.**

1. Your personal details

Surname*	(Mr Mrs Ms Miss Dr)		
<input type="text"/>	<input type="text"/>		
Given names*	Date of birth*		
<input type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Other/previous names	Gender (✓ tick one only)		
<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female		
Residential address	<input type="text"/>		
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Previous address (if the address held by your PREVIOUS fund is different to your current residential address)			
<input type="text"/>			
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email	Telephone	Mobile number	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Tax File Number (see note overleaf)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

2. Previous fund details

Name of previous fund*			
<input type="text"/>			
Address of previous fund*			
<input type="text"/>			
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Name of administration company (if known)			Phone number of previous fund (if applicable)
<input type="text"/>			<input type="text"/>
Fund membership or SPIN number*	Superannuation fund number or Australian Business Number (ABN)		
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Previous employer name (if applicable)	Approximate date I left		
<input type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

3. Mercy Super details

ABN 11 789 425 178 **SFN** 124 718 942 • Phone number **1300 368 891** Member number (if known)

4. Proof of identity* (see overleaf for details)

(✓ please tick)

I have attached a certified copy of my Driver's Licence or Passport

OR

I have attached certified copies of both:

Birth/Citizenship Certificate or Centrelink Pension Card **AND**

Centrelink payment letter or Government or local council notice showing name and address.

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5. Authorisation

By signing this request I am making the following statements:

- I declare I have fully read this form and the information completed is true and correct.
- I am aware I may ask my superannuation 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 discharge the provider of my previous fund of all further liability in respect of the benefits paid and transferred to Mercy Super.
- I request and consent to the transfer of superannuation as described above and authorise the previous superannuation provider to give effect to this transfer.

I declare that:

- The details provided above are true and correct in every detail and I authorise Mercy Super to update its records accordingly.
- I have received and had the opportunity of reading the Fund's Member Booklets, including any Supplementary Product Disclosure Statements. I understand that the Fund's Financial Services Guide is available upon request and that it can also be read on the Fund's website.
- I have had the opportunity of reading the Fund's Privacy Policy and understand and approve how my personal information may be used.

Your name

Member's signature

Date

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Important information regarding identification requirements

Completing Proof of Identity

You will need to provide documentation with this transfer request to prove you are the person to whom the superannuation entitlements belong.

The following documents may be used:

EITHER

One of the following documents:

- Driver's licence issued under State or Territory law
- Passport.

OR

One of the following documents:

- Birth certificate or birth extract
- Citizenship certificate issued by the Commonwealth
- Pension card issued by Centrelink that entitles the person to financial benefits.

AND

One of the following documents:

- A notice issued by a Commonwealth, State or Territory within the preceding 12 months that contains your name and residential address and records the provision of financial benefit. For example:
 - Centrelink benefits
- A notice issued by the ATO within the past 12 months that contains your name and residential address. For example:
 - Tax Office Notice of Assessment
- A notice issued by a local government body or utilities provider within the preceding three months that contains your name and residential address. For example:
 - A Rates Notice.

Have you changed your name or are you signing on behalf of another person?

If you have changed your name or are signing on behalf of the applicant, you will need to provide a certified linking document. A linking document is a document that proves a relationship exists between two (or more) names. These include Marriage Certificate, Deed Poll or Change of Name Certificate from Births, Deaths and Marriages Registration Office, Guardianship papers or Power of Attorney.

Certification of personal documents

All copied pages of ORIGINAL proof of identification documents (including any linking documents) need to be

certified as true copies by any individual approved to do so (see list on page 3).

The person who is authorised to certify documents must sight the original and the copy and make sure both documents are identical, then make sure all pages have been certified as true copies by writing or stamping 'certified true copy' followed by their signature, printed name, qualification (eg Justice of the Peace, Australia Post employee, etc) and date.

We will contact your previous fund

Completing this form authorises the Trustee of Mercy Super to contact your previous fund/s. The Fund will arrange for your benefits to be rolled over.

What if you have more than one previous super fund?

If you have more than one fund to rollover into Mercy Super, please complete a separate form for each fund.

Privacy information

Information on this form will be handled by the Fund to process your benefit payment. It may be disclosed to your employer, government agencies and other parties as required, including the trustee of any other fund you may transfer to. By signing this form you consent to this handling of your personal information. If you do not provide the information we may not be able to make payment as requested. You may access your personal information by contacting the Fund's Privacy Officer.

Tax File Number (TFN)

You are not obligated to provide your TFN to your superannuation fund. However, if you do not provide your TFN, your benefit may be taxed at the highest marginal tax rate plus the Medicare levy on employer and salary sacrifice contributions made to your account in the year, compared to the concessional tax rate of 15%. Your fund may deduct this additional tax from your account.

If your superannuation fund does not have your TFN, you will not be able to make personal contributions to your superannuation account. Choosing to quote your TFN will also make it easier to keep track of your superannuation in the future.

Under the Superannuation Industry (Supervision) Act 1993, your superannuation fund is authorised to collect your TFN, which will only be used for lawful purposes. These purposes may change in the future as a result of legislative change. The TFN may be disclosed to another superannuation provider, when your benefits are being transferred, unless you request in writing that your TFN is not to be disclosed to any other trustee.

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FUND USE ONLY

Processed by:

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Checked by:

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Persons who can certify identification documentation

The persons listed below can certify member's customer identification documentation:

- a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)
- a judge of a court
- a magistrate
- a chief executive officer of a Commonwealth court
- a registrar or deputy registrar of a court
- a Justice of the Peace
- a notary public
- a police officer
- an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- an Australian consular officer or an Australian diplomatic officer (within the meaning of the *Consular Fees Act 1955*)
- an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the *Statutory Declaration Regulations 1993*)
- a finance company officer with 2 or more years of continuous service with one or more finance companies (for the purposes of the *Statutory Declaration Regulations 1993*)
- an officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees
- a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants
- Chiropractor
- Dentist
- Legal practitioner
- Medical practitioner
- Nurse
- Optometrist
- Patent attorney
- Pharmacist
- Physiotherapist
- Psychologist
- Trade marks attorney
- Veterinary surgeon
- Bailiff
- Clerk of a court
- Commissioner for Affidavits
- Commissioner for Declarations
- Employee of the Australian Trade Commission who is:
 - (a) in a country or place outside Australia; and
 - (b) authorised under paragraph 3 (d) of the *Consular Fees Act 1955*; and
 - (c) exercising his or her function in that place
- Employee of the Commonwealth who is:
 - (a) in a country or place outside Australia; and
 - (b) authorised under paragraph 3 (c) of the *Consular Fees Act 1955*; and
 - (c) exercising his or her function in that place
- Fellow of the National Tax Accountants' Association
- Holder of a statutory office not already specified in one of the other items listed
- Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the *Marriage Act 1961*
- Master of a court
- Member of Chartered Secretaries Australia
- Member of Engineers Australia, other than at the grade of student
- Member of the Association of Taxation and Management Accountants
- Member of the Australian Defence Force who is:
 - (a) an officer; or
 - (b) a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with 5 or more years of continuous service; or
 - (c) a warrant officer within the meaning of that Act
- Member of:
 - (a) the Parliament of the Commonwealth; or
 - (b) the Parliament of a State; or
 - (c) a Territory legislature; or
 - (d) a local government authority of a State or Territory
- Minister of religion registered under Subdivision A of Division 1 of Part IV of the *Marriage Act 1961*
- Permanent employee of:
 - (a) the Commonwealth or a Commonwealth authority; or
 - (b) a State or Territory or a State or Territory authority; or
 - (c) a local government authority;with 2 or more years of continuous service who is not already specified in one of the other items listed
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Senior Executive Service employee of:
 - (a) the Commonwealth or a Commonwealth authority; or
 - (b) a State or Territory or a State or Territory authority
- Sheriff
- Sheriff's officer
- Teacher employed on a full-time basis at a school or tertiary education institution
- Member of the Australasian Institute of Mining and Metallurgy.

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