



Superannuation member exit statement

➤ Before completing this statement, refer to *Completing the Superannuation member exit statement* (NAT 13642).
To obtain a copy:

- visit our website at ato.gov.au or
- phone us on **13 10 20**.

WHEN COMPLETING THE STATEMENT

- Print clearly, using a black pen only.
- Use BLOCK LETTERS and print one character in each box.
- Place in all relevant boxes.

Section A: Supplier information

1 Tax file number (TFN)

2 Australian business number (ABN)

3 Organisation name

4 Street address

Suburb/town

State/territory

Postcode

Country if other than Australia

5 Postal address

Suburb/town

State/territory

Postcode

Country if other than Australia

6 Contact person

Name

Daytime phone number (including STD or ISD code)

Fax number (including STD or ISD code)

Email address

7 Number of member exit statements attached

8 Your reference

9 Signature

Name (print in BLOCK LETTERS)

Signature

Date

Day

Month

Year

 / /

Section B: Constitutionally protected fund (CPF) information

10 TFN

11 ABN

12 Date of report ^{Day} / ^{Month} / ^{Year}

13 Current name

14 Street address

Suburb/town

State/territory

Postcode

Country if other than Australia

15 Current postal address

Suburb/town

State/territory

Postcode

Country if other than Australia

16 Address for service of notices

CPF's postal address

Supplier's postal address

17 Contact person

Name

Daytime phone number (including STD or ISD code)

Fax number (including STD or ISD code)

Email address

18 Signature

Name (print in BLOCK LETTERS)

Signature

Date

 ^{Day} / ^{Month} / ^{Year}

Section C: Member information

19 CPF's TFN

20 Account number

21 Client identifier

22 Account benefit structure

Accumulated benefits account Funded defined benefits account Unfunded defined benefits account

23 TFN

24 Full name

Title: Mr Mrs Miss Ms Other

Family name

First given name

Other given names

25 Previous name

Family name

First given name

Other given names

26 Date of birth Day / Month / Year

27 Residential address

Suburb/town

State/territory

Postcode

Country if other than Australia

28 Returned mail unclaimed? No Yes

29 Is the member deceased? No Yes


Section D: Member exit information

30 Show the date / /

31 Employer financed component amount \$, , .

32 Reason code Leave it blank C

33 Destination type R I D V


 Do not use pins or staples to attach any extra documents.

Privacy

The ATO is a government agency bound by the Privacy Act 1988 in terms of handling personal information and tax file numbers (TFN).

We are authorised by the *Taxation Administration Act 1953* to ask for the information requested on this form, including your member's TFN. We require this information to help us administer taxation and superannuation laws. We may give this information to other government agencies.

For further information about privacy go to ato.gov.au/privacy

 Keep a copy for your records and send your completed statement to us at:

Australian Taxation Office
PO Box 3333
PENRITH NSW 2740