Consolidate With QSuper

When to use this form

Complete this form if you have another superannuation account (including an SMSF) and would like to transfer part or all of the money from that account into your QSuper Accumulation account. If you want to transfer from more than one account, please complete section 2 in full.

If you would prefer to do this online, you can combine your other super money into QSuper through Member Online at memberonline.qsuper.qld.gov.au or search for your other super at my.gov.au

If you currently only have a QSuper Income account and/or Lifetime Pension, you will need to open a QSuper Accumulation account and combine your super into that account. Then you can either restart your Income account or open a new Lifetime Pension using that money. Please see the Product Disclosure Statement for Income Account and Lifetime Pension for more information.

You can't use the form to transfer an overseas pension fund to Australia. For information about your options, please see our Transfer of Overseas Pension Funds factsheet available at **qsuper.qld.gov.au/factsheets** or call us to request a copy.

For more information about how to transfer your super to QSuper, read Consolidating Your Super With QSuper at qsuper.qld.gov.au/factsheets or call us on 1300 360 750.

Please complete in **BLOCK** letters, in blue or black ink.

1 Personal details	
Client number	Residential address
You can find your client number on your annual	State Postcode
statement or by logging in to Member Online.	Postal address As above
Title First name/s	/ Sabove
Last name	State Postcode
Previous name¹ (if we know you by another name)	
Date of birth (dd/mm/yyyy)	
Home phone number Mobile phone number	
Work phone number	
Email address	1 If your name has changed and you work for the Queensland Government or a default employer, let your payroll office know and they'll then let us know. Otherwise, please send us a certified copy of either a marriage certificate or other legal change of name document.



2 Details of your other super fund/s and amount you	Name of other fund 2
want to transfer (mandatory)	
If your name is listed differently at your other	ABN of other fund ²
super fund, you'll need to contact them to	
update your details before you send this form to us.	Unique Superannuation Identifier (USI) of other fund ² (N/A for SMSF)
If you are closing your other super account, make sure:	Electronic service address (ESA) ³ (mandatory for SMSF)
1. You have already asked your employer to pay	Phone number of other fund
your future super contributions to QSuper – see	
qsuper.qld.gov.au/changingjobs	Your membership account number with other fund
You have found out whether or not transferring your super from your other super fund will mean	
you lose any benefits, including insurance, and to	My full balance
confirm whether you will be taxed.	OR
Name of other found 1	Partial amount you want to transfer
Name of other fund 1	(dollars and cents - do not round up or down)
ABN of other fund ²	\$
ADIVOI Other fullu	
Unique Superannuation Identifier (USI) of other fund ²	Name of other fund 3
(N/A for SMSF)	
	ABN of other fund²
Electronic service address (ESA) ³ (mandatory for SMSF)	
	Unique Superannuation Identifier (USI) of other fund ²
Phone number of other fund	(N/A for SMSF)
Your membership account number with other fund	Electronic service address (ESA) ³ (mandatory for SMSF)
My full balance	Phone number of other fund
OR OR	V
Partial amount you want to transfer	Your membership account number with other fund
(dollars and cents - do not round up or down)	O M 6 III I
\$	My full balance
	OR :
	Partial amount you want to transfer (dollars and cents - do not round up or down)
	(dollars and cents - do not round up or down)
	Ψ

Need help?

You can call us on 1300 360 750 if you'd like help with completing this form.

Name of other fund 4		
ABN of other fund ⁴		
Unique Superannuation Identifier (USI) of other fund ⁴ (N/A for SMSF)		
Electronic service address (ESA) ⁵ (mandatory for SMSF)		
Phone number of other fund		
Your membership account number with other fund		
My full balance		
OR		
Partial amount you want to transfer		
(dollars and cents - do not round up or down)		
\$		

If you have other super funds you want to transfer to QSuper, please provide these details on a separate sheet of paper and attach it to the back of this form.

How your funds will be invested

Your transfer will be invested according to your current investment preferences strategy. You can check your current investment options in Member Online at memberonline.qsuper.qld.gov.au under 'Investments' then 'Your investments', by checking your annual statement, or by calling us.

Declaration and authorisation

- I know I can contact my other super fund to find out if transferring this money will affect my benefits with them. By signing this form, I am letting you know that I have either received this information from them, or I do not need any more information.
- I am the person named on this form, or have a power of attorney to act on the member's behalf.6
- I want the Australian Retirement Trust to arrange the transfer of my money from my other super fund to my QSuper Accumulation account.
- Once payment is made to my QSuper account, if I've selected to transfer my full balance from the other super
 - I understand this will close my account with that super fund.
- I have notified my employer (if relevant) to pay any future contributions to my QSuper account.
- I understand my other fund/s may contact me to ask for documents to satisfy their proof of identity requirements.
- I understand that my transfer will be invested according to my current investment strategy.
- I declare all information provided in this form is true and correct.

Name	
Signature	
Date signed (dd/mm/yyyy)	
/ /	

⁴ Please check your other super fund's website or contact them to find out their ABN and Unique Superannuation Identifier (USI). USI does not apply for an SMSF. $\textbf{5} \ \ \text{You need an electronic service address} \ \ \text{(ESA)} \ \ \text{for your SMSF} \ \ \text{provider to send us your data}. \ \ \text{Please contact your SMSF} \ \ \text{provider for the ESA}. \ \ \text{This is only required}$ for an SMSF.

⁶ If you're signing as a power of attorney and you haven't already given us a certified copy of your power of attorney documentation, please attach it to this form.

For more information

If you want to learn more about your super we can help.



Calculators at qsuper.qld.gov.au/calculators

Try our educational calculators to learn more about your insurance, investments, how to maximise your super, and retirement planning.



(a) Call us on **1300 360 750**

Our Member Services team will be happy to discuss your account with you.



Advice

Deciding what is best for you will depend on your personal circumstances and you may want to seek personal financial advice to get the most from your superannuation. You can find out more about financial advice options at qsuper.qld.gov.au/advice

If you have not previously provided your Tax File Number (TFN) and wish to supply this, please update via Member Online or by completing the Tax File Number notification form available on our website. To protect your privacy, please do not write your TFN on this form.

Member Centres

Visit **qsuper.qld.gov.au/membercentres** for locations

Member Services team

Phone 1300 360 750 Overseas +617 3516 1009 Monday to Friday 8.00am – 6.00pm (AEST) Postal address GPO Box 200 Brisbane QLD 4001 Email qsuper@qsuper.qld.gov.au Fax 1300 242 070

Website qsuper.qld.qov.au

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