

Contribution form

Section 3: Member eligibility to contribute

Please select (✓) the relevant box(es) to indicate your age and eligibility to make or receive a contribution:

- Under age 65
- Aged 65 to 69 and
 - Mandated employer contributions will be made on my behalf (Award and Superannuation Guarantee contributions only)
 - I have worked at least 40 hours in a period of not more than 30 consecutive days in the current financial year
- Aged 70 to 74 and
 - Mandated employer contributions will be made on my behalf (Award contributions only)
 - I have worked at least 40 hours in a period of not more than 30 consecutive days in the current financial year (member personal contributions only).

Section 4: Employer contribution details

If an employer is making contributions on your behalf please provide their details.

Company's name

Contact's name

Contact's telephone number

ABN

ACN

 - - - - - -

Street address

Suburb

State

Postcode

Section 5: Financial adviser details

Financial adviser's dealer group

Financial adviser's name

Financial adviser's contact number

Section 6: Contributor declaration and signature

I declare that I have provided my tax file number and no more than \$150,000 of non-concessional contributions have been made to my Fund this financial year (\$450,000 averaged over three years) and no more than \$50,000 of concessional contributions have been made to my Fund this financial year. Where I have not provided my tax file number or contributions in excess of the caps have been made, I understand that contributions will be taxed at 46.5%.

I intend to claim a tax deduction for the contributions I have made this financial year.

Member's signature

Date

 / /

Please return to AET Super Solutions by:

Fax (03) 9349 2750

Email admin@aetsupersolutions.com.au

or Post AET Super Solutions

Locked Bag 213, Parkville VIC 3052