

# Combine your super with Spirit Super

1800 005 166  
[info@spiritsuper.com.au](mailto:info@spiritsuper.com.au)  
GPO Box 1547, Hobart TAS 7001

## Important information

This request may close the account you're transferring your benefits from.

### Before combining your super:

- consider all relevant information. Differences in fees and investment returns can affect your super balance at retirement
- check if you have insurance with your other fund, as this will cease if your account is closed. You may be eligible to transfer your cover, contact us for more information
- consider if you want to claim a tax deduction or split contributions, as you won't be able to do this on the contributions you've transferred.

Let your employer know that you've changed super funds. All future contributions should then be paid to Spirit Super.

If you're transferring from a self-managed super fund (SMSF), you'll need to contact your SMSF to arrange the transfer to Spirit Super.

## Section 1

### Your details

Member number

Account number

Date of birth (DD MM YYYY)

Last name

First name

Middle name/s

Residential address

Suburb/Town/City

State

Postcode

Home phone

Mobile

Work phone

Email

## Section 2

### Provide your tax file number (TFN) as proof of identity

Do we have your TFN?

 Yes No but here it is:

You don't have to provide your TFN, but you may pay extra tax, miss out on government incentives and you can't make personal contributions. Refer to our *How super is taxed* fact sheet available at [spiritsuper.com.au/pds](https://spiritsuper.com.au/pds) for more information.



### Section 3 Super fund details

#### From (your old fund)

Fund name\*

Member/account number

Phone

ABN\*

Unique superannuation identifier (USI)\*

Transfer amount\*

Total balance transfer

(OR)

Partial balance transfer of \$

\*Mandatory information required

You need to complete a separate form for each fund you'd like to combine.

#### To

S P I R I T S U P E R

1 8 0 0 0 0 5 1 6 6

7 4 5 5 9 3 6 5 9 1 3

M T A O 1 O O A U

### Section 4 Member declaration

By signing this form I'm making the following statements:

- I declare that I've fully read this form and the information is true and correct.
- I'm aware that by transferring my super to Spirit Super, I may lose benefits such as insurance with my previous fund. I've considered this and don't require any further information.
- I discharge the trustee of my previous super fund from any further liability in respect of my benefits paid and transferred to Spirit Super.
- I consent to the use of my personal information as outlined in Spirit Super's *Privacy policy* which is available at [spiritsuper.com.au/privacy-policy](https://spiritsuper.com.au/privacy-policy) or by calling us on 1800 005 166.
- I authorise Spirit Super to contact my other super fund regarding this request.
- I request and consent to the transfer of super as described above and authorise the super provider of each fund to give effect to this transfer.

Your signature

Date (DD MM YYYY)



Return the completed, signed and dated form to [info@spiritsuper.com.au](mailto:info@spiritsuper.com.au) or Spirit Super, GPO Box 1547, Hobart TAS 7001.

