



ANZ Australian Staff Superannuation Scheme

Making a contribution on behalf of your spouse

As a member of the ANZ Australian Staff Superannuation Scheme ("ANZ Staff Super"), you can contribute to ANZ Staff Super on behalf of your spouse. You will need to complete this form each time you make a lump sum contribution. Note that your spouse must provide their Tax File Number (TFN) before contributions can be accepted by ANZ Staff Super. If the TFN has not been provided, contributions cannot be accepted and will be returned to you.

If you need help

For assistance call ANZ Staff Super on **1800 000 086**, or refer to www.anzstaffsuper.com.

Step 1 – Complete your eligible spouse details
Please print in black or blue pen, in uppercase, one character per box. A

Title Mr <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Miss <input type="radio"/> Other <input style="width: 30px;" type="text"/>		Date of birth <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/>	
Given names <input style="width: 100%;" type="text"/>			
Surname <input style="width: 100%;" type="text"/>			
Postal address <input style="width: 100%;" type="text"/>			
Suburb <input style="width: 60%;" type="text"/>		State <input style="width: 20%;" type="text"/>	Postcode <input style="width: 20%;" type="text"/>
Daytime Telephone <input style="width: 60%;" type="text"/>		Mobile <input style="width: 40%;" type="text"/>	
E-mail <input style="width: 100%;" type="text"/>			
Membership number <input style="width: 100%;" type="text"/>			

Continued over

Step 2 – Make a contribution – contributing spouse

Title Mr <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Miss <input type="radio"/> Other <input style="width: 30px;" type="text"/>		Date of birth <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/>	
Given names <input style="width: 100%;" type="text"/>			
Surname <input style="width: 100%;" type="text"/>			
Membership number <input style="width: 100%;" type="text"/>			

I wish to contribute an amount of \$ which represents a spouse contribution on behalf of my spouse named in Step 1 above, who is a member of the ANZ Australian Staff Superannuation Scheme.

Please make cheque payable to ANZ Australian Staff Superannuation Scheme and attach to this form.



Protecting members' privacy

The Trustee, ANZ Staff Superannuation (Australia) Pty Limited, seeks to take all reasonable steps to protect members' privacy and the confidentiality of members' personal information.

The Scheme Administrator, Mercer, collects (on behalf of the Trustee) personal information directly from members and their employers. Sometimes information about you may be collected from other third parties such as a previous superannuation fund, your financial adviser or publicly available sources. We collect, use and disclose personal information about you to provide and manage your account in the Scheme and give you information about your super, or as required by super and tax laws.

If you do not provide the personal information requested or it is incomplete or inaccurate, we may not be able to manage your account properly and processing of transactions to, from or in relation to your account may be delayed.

Members' personal information is kept confidential, but may be disclosed by the Trustee or Scheme Administrator to third parties, such as the Scheme's actuary, insurer, medical consultants, underwriter, legal adviser and auditor and other external service providers who are contracted to assist with administering members' benefits. It may also be disclosed where expressly authorised or required by law, for example to government agencies such as the Australian Taxation Office and Superannuation Complaints Tribunal. Members' personal information may also be disclosed to the Group Superannuation Department of ANZ for the purposes of administering members' benefits or resolving members' inquiries or complaints.

Members' personal information may be disclosed to related entities of the Scheme Administrator located overseas (in particular, its wholly owned Global Operations Shared Services function in India) as part of the day-to-day provision of administration services.

The Trustee's Privacy Policy Statement contains more detail about how we deal with your personal information and information about how you can access and seek correction of information we hold about you. It also includes information about how you can lodge a complaint about how we've dealt with your personal information and how that complaint will be handled.

If you have any queries in relation to privacy issues, please contact:

ANZ Staff Super
GPO Box 4303
Melbourne VIC 3001
Telephone: 1800 000 086
Facsimile: 03 9245 5827
Email: anzstaffsuper@superfacts.com

The Trustee's Privacy Policy Statement is available on the Scheme's website www.anzstaffsuper.com or from ANZ Staff Super by calling 1800 000 086. You can also access the Scheme Administrator's privacy policy on the Scheme's website.

Step 3 – Sign the form - contributing spouse

I wish to make contributions to ANZ Staff Super for the benefit of my spouse named above (Step 1) who is an existing member and eligible to receive such contributions. By signing this form I understand that:

- I acknowledge that any such contributions to ANZ Staff Super are for the benefit of my spouse and cannot be repaid to me. I confirm that the spouse is my spouse within the meaning of relevant Government Legislation (as set out in the Product Disclosure Statement), and if over the age of 65 and under 70, is gainfully employed for at least 40 hours in any 30 consecutive days during the financial year in which the contribution is being made.
- I will advise the Trustee if my nominated spouse ceases to be my spouse within the meaning of the legislation or, if between 65 and 70 ceases to be gainfully employed for at least 40 hours in any 30 consecutive days during the financial year in which the contribution is being made.
- I confirm that I am not entitled to a tax deduction for these spouse contributions.
- I consent to my information being collected, disclosed and used in the manner set out in this form.

Signature

X

Date

/ /

Please return your completed form to ANZ Staff Super, GPO Box 4303, Melbourne, VIC 3001.

