



# ANZ Australian Staff Superannuation Scheme

## Nominating your beneficiaries

### Who will get your super if you die?

Please complete this form if you would like to select or change your binding or non-binding nominations.

Please read the information in the Product Disclosure Statement before completing this form which allows you to nominate how you would prefer your benefit to be paid in the event of your death.

### If you need help

For assistance call ANZ Staff Super on **1800 000 086**, or refer to the website [www.anzstaffsuper.com](http://www.anzstaffsuper.com).

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

Title Mr  Mrs  Ms  Miss  Other         Date of birth  /  /

Given names

Surname

Postal address

Suburb                          State          Postcode

Daytime Telephone                Mobile

E-mail

Membership number

*Continued over*

Issued by ANZ Staff Superannuation (Australia) Pty Limited ABN 92 006 680 664 AFSL 238268 as Trustee for the ANZ Australian Staff Superannuation Scheme  
ABN 83 810 127 567

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





## Step 2 – Nominate your beneficiaries (continued)

### Notes:

\* Please provide the contact address and date of birth for each of your nominees to assist us to contact them in the event of your death.

# The persons you nominate must be your 'Dependant' or legal personal representative (that is, the executor or administrator of your estate).

'Dependant' is defined as:

- your spouse – whether by marriage, a de facto relationship (including same-sex partners) or a registered relationship under a law of State or Territory (including same-sex partners);
- your children including step-children, adopted children and your spouse's children;
- any other person who the Trustee considers is wholly or partially dependent on you at the time of death; or
- any person you have an interdependency relationship with. Two people (whether or not related by family) have an interdependency relationship if:
  1. they have a close personal relationship;
  2. they live together; and
  3. one or each of them provides the other with financial support; and
  4. one or each of them provides the other with domestic support and personal care.

An interdependency relationship will also exist between two people if they have a close personal relationship but do not meet the other criteria as listed above (2, 3 & 4) because either or both of them suffer from a physical, intellectual or psychiatric disability.

### Option B

I would like all (100%) of my benefit paid to my estate

Any amounts paid to your legal personal representative would be distributed according to your Will, or if you don't have a Will, according to the laws of the State in which you resided at the date of your death.

## Step 3 – Type of nomination

**Choose either a non-binding or binding nomination. Please tick one option only and complete the relevant details for that option.**

**Option 1 – Non-binding nomination**

By signing below I declare that I have read this section and understand that:

- the nominations I have made on this form are not binding on the Trustee and the Trustee is not obliged to pay a death benefit to the dependant(s) I nominate
- the Trustee cannot consider a nomination unless it is in favour of my spouse, my children, a person who is financially dependent on me and/or a person who is my dependant under superannuation law
- if a nominated beneficiary does not survive me, his/her share of the benefit may be paid, at the discretion of the Trustee, to my estate or to my other dependants.
- I consent to my information being collected, disclosed and used in the manner set out in this form.

Signature

X

Date

/  /

**Option 2 – Binding nomination**

By signing below I declare that I have read this section and understand that:

- my nomination in this form will be legally binding on the Trustee if it is still valid and in effect at the time of my death.
- my nomination in this form will be invalid if:
  - it has not been completed correctly, or completed prior to my admission to membership of the Scheme
  - the persons nominated or my Dependants and/or legal personal representative at the time of my death are no longer alive
  - the Trustee is legally restrained or prohibited from paying my super to one or more of the persons nominated in this form.
- my nomination in this form will expire and cease to have effect:
  - after 3 years, unless I re-confirm, revoke or amend it at an earlier time;
  - if and for so long as the Trustee is prevented from making a payment due to Family Law; or
  - I am subject to a Court Order prohibiting me to make a binding death benefit nomination or requiring me to amend or revoke a binding death benefit nomination.
- I consent to my information being collected, disclosed and used in the manner set out in this form.

*Continued over*



## Step 3 – Type of nomination (continued)

Signature

X

Date

/ /

**Witness One** (insert full name)

I confirm that I am at least 18 years of age, am not a person nominated in Step 2 of this form and that the member named above has signed this form in my presence.

Signature

X

Date

/ /

I understand and consent to my information being collected, disclosed and used in the manner set out in this form.

**Witness Two** (insert full name)

I confirm that I am at least 18 years of age, am not a person nominated in Step 2 of this form and that the member named above has signed this form in my presence.

Signature

X

Date

/ /

I understand and consent to my information being collected, disclosed and used in the manner set out in 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 Australian Financial Complaints Authority. 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](http://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.

