

1. Spouse's personal details (to be completed by partner receiving the contribution)

Member number:

Title: Mr Mrs Miss Ms Other

Surname:

Given name/s:

Date of birth:

Address:

Suburb: State Postcode

Contact email address:

Contact phone number: Mobile No.

Is the receiving spouse a Vision Super member?

 Yes If YES, please provide membership number:
 No If NO, to accept this contribution the spouse will need to join the Vision Super Personal Plan. Please download a copy of the Personal Plan Product Disclosure Statement (PDS) and Target Market Determination (TMD) from www.visionsuper.com.au or call our Member Services team to have a PDS mailed out. The PDS and TMD contains important information you should consider prior to making a decision about the product and includes the relevant application forms.
To accept this contribution, please sign the following declaration.

I declare that: (1) I am married and living together with the contributing spouse or are currently living in a de facto relationship (including same sex partners) (2) I am a resident Australian Taxpayer (3) I am under age 75 (4) I understand that the contribution will be invested according to my current investment option.

Signature: Date:

2. Contributor details (to be completed by partner making contributions)

Title: Family name:

Given name/s: Date of birth:

Home Address:

Suburb: State Postcode

Contact phone number: Mobile No.

To accept this contribution, please sign the following declaration.

I declare that: (1) I am married and living together with the eligible spouse or are currently living in a de facto relationship (including same sex partners) (2) I am a resident Australian taxpayer.

Signature: Date:

3. Contribution details

Payment method: Electronic Funds Transfer (EFT) Date of EFT: BPAY Cheque

Amount of contribution:

This information is required for the sole purpose of managing and payment of superannuation benefits and entitlements and will be protected in accordance with the provisions of the Privacy Act 1988 and Vision Super privacy policies.

Please forward this completed form to:

memberservices@visionsuper.com.au | PO Box 18041, Collins Street East, VIC 8003

Vision Super Pty Ltd ABN 50 082 924 561 AFSL 225054, is the Trustee of the Local Authorities Superannuation Fund
ABN 24 496 637 884

Contact Centre team 1300 300 820

www.visionsuper.com.au