

ANZ Superannuation Savings Account (ANZ SSA) Contributions Remittance Advice



21 June 2012

Customer Services

Phone 13 38 63
Fax 02 9234 6668

Email customer@onepath.com.au
Website anz.com

Date faxed (dd/mm/yy)

Number of pages faxed

Full name of employer

Allocated ANZ SSA employer number For the period / / to / / Page of

Contribution method ANZ branch Electronic funds transfer (EFT) Cheque

Surname	Given names	Member number	Super Guarantee (Mandated employer contributions)	Employer (Additional employer contributions)	Salary sacrifice (Arranged employer contributions)	Member (Voluntary member contributions)	
			Before tax contributions	After tax contributions	Before tax contributions	After tax contributions	
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	
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<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	
Totals			\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	
						Contributions total (cheque total)	\$ <input type="text"/>

Where a member's investment represents a transfer from another fund or superannuation provider, please provide Rollover Benefit Statement details. Please ensure cheque amount equals the contributions total.

Declaration

I acknowledge that I am not aware and have no reason to suspect that the member's investment is derived from, related to or used to fund, money laundering, terrorism financing or other similar activities and my instructions in relation to the member's investment will not result in ANZ or any of its related group companies breaching any related laws or regulations in Australia or any other country.

Forward payment to:

ANZ Superannuation Savings Account
GPO Box 4028
Sydney NSW 2001
Phone 13 38 63
Fax 02 9234 6668

Name of authorised contact person

Signature of authorised contact person (sign clearly within box) X

Date (dd/mm/yy) / /

Phone