Corporate Super
Employer Contribution Form

1 October 2005

ING Corporate Super ABN 89 952 167 477
ING Custodians Pty Limited ABN 12 008 508 496  AFSL 238346
ING Life Limited ABN 33 009 657 176  AFSL 238341
347 Kent Street, Sydney 2000

This form should be completed by members of Corporate Super Personal to allow their new employer to contribute to their Corporate Super Personal account.

Instructions – Complete and return this form to the following address:
Corporate Super
ING Life Limited
GPO Box 5306
Sydney NSW 2001
Phone 1800 627 625
Fax 02 9234 6668
Email corpsuper@ing.com.au
Website www.ing.com.au

1. Current member details
   Member no. / 
   Member surname
   Given name(s)

2. Employer details
   Employer name
   Employer address
   State Postcode
   ABN

3. Contribution Type
   SG Amount $ .
   Salary Sacrifice Amount $ .
   Member Post Tax Amount $ .

Note: Cheques should be made payable to Corporate Super – ING Life Limited.

4. Declaration and authorisation
   In making this contribution, I (the payer) acknowledge that once the contribution has been received by Corporate Super, control over the payment or any growth upon it will be forgone, and it will be preserved until a condition of release is met.

Employer Authorised Officer Signature   Date

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