



CONTRIBUTION SPLITTING FORM

This is the form you should fill out to split superannuation contributions with your spouse. You should read the Product Disclosure Statement (PDS) for Future Super before completing this form.

The PDS is deemed to include the Additional Information Booklet and Insurance Guide which can be obtained from www.myfuturesuper.com.au or on request by phoning 1300 658 422

An application to split contributions can only be made in the financial year immediately after the financial year in which the contributions were made

This form must be posted to Future Super GPO Box 1858, Sydney, NSW 2001

Section 1 Personal details

Given Name(s)	<input type="text"/>		
Surname	<input type="text"/>		
Member number	<input type="text"/>		
Date of Birth	<input type="text"/>		
Gender	<input type="text"/>		
Phone number	<input type="text"/>		
Email address*	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>

*By providing your email address, you consent and authorise us to send communications or information in electronic format, including information required by law, to you via email or similar technologies.

You can elect to receive communications by post at any time by contacting Future Super on 1300 658 422 or email info@myfuturesuper.com.au or in writing at GPO Box 263, Sydney, NSW 2001.

Section 2 Spouse details

Given Name(s)	<input type="text"/>
Surname	<input type="text"/>
Date of Birth	<input type="text"/>

Phone number

Email address

Tax File Number

Address

City State Postcode

Section 3 Your spouse's superannuation account

Name of Fund

Fund USI

Member Number

The amount to be split into your spouse's account must not exceed 85% of your contributions for the financial year or exceed the concessional contributions cap. Complete the amount to be split below.

Dollar amount

or

Percentage amount

Section 4 Spouse Declaration

I confirm that I am (select one)

- Aged less than my preservation age Between my preservation age and 65 and not permanently retired

.....
Signature Date

Section 6 Declaration and Signature

By completing this form I declare that:

- I have read the Future Super Product Disclosure Statement and related information.
- I understand that I can only make one split application per financial year.
- I understand that a contributions splitting application may be rejected without reasons being provided.
- I wish to split contributions that were made in the financial year ending 30/06/2018

x
.....
Signature Date