

Transfer Authority Form

September 2018

New Fund Details

Name of New Fund Pitcher Retirement Plan
ABN 15 828 677 472

Address of New Fund GPO Box 5193
Melbourne Vic 3001

Member Details

Mr	Mrs	Miss	Ms	Other	
First given name*					
Family name*				Date of Birth*	
Residential address*					
Suburb/town*			State*		Postcode*
Email*					
Phone*					
Member number in Pitcher Retirement Plan (if known)					

Old Fund Details

Fund name*	
Australian Business Number	
Unique Superannuation Identifier*	
Member number in old fund*	

Is this a whole or partial balance transfer?*

Whole – I'd like to transfer the whole balance from my old fund. This will close your account in the old fund.

OR

Partial – I'd like to transfer the following amount from my old fund:

\$

* Denotes mandatory field. If you do not complete all of the mandatory fields, there may be a delay in processing your request.

Transfer Authority Form (continued)

Authorisation to Transfer Benefits to the Pitcher Retirement Plan

I authorise the transfer of some or all (see above) of my benefits from my old fund to the Pitcher Retirement Plan;

Where I have requested a transfer of the whole balance in my old fund, I authorise the transfer of any contributions still to be received by my old fund after benefits have been transferred to Pitcher Retirement Plan.

By giving this authorisation to transfer my benefits:

- I am aware I may ask my superannuation provider for information about any fees or charges that may apply, or any other information about the effect this transfer may have on my benefits, and have obtained or do not require such information;
- I understand that the Trustee of my old fund is discharged from any further liability in respect of any benefits transferred;
- I understand that both superannuation funds are complying funds under Commonwealth Government legislation;
- I understand that in certain cases the Pitcher Retirement Plan may be required by law to deduct tax from the untaxed portion, if any, of the Eligible Termination Payment (ETP) transferred.

I confirm that the Plan's Privacy Policy has been made available to me and I understand why the information in this form is being collected.

Signature

Date

Transfer Authority Form Explanatory Notes

Transfer Authority Form

This form authorises the transfer of benefits between superannuation funds.

When to use this form:

- Use this form if you want to transfer monies from your old superannuation fund to the Pitcher Retirement Plan.
- Complete a separate form for each old fund from which you wish to transfer benefits (forms may be photocopied).

Important

- Please complete all details on this form. Transfers cannot be made if the old fund details are different from the information you complete on this form.
- We suggest you use the latest member statement from your old fund to obtain the information required for the *Old Fund Details* section.
- There may be an exit fee charged by your old superannuation fund. Please check with your old fund for details or your benefit statement.

Please forward this completed form to:

Pitcher Retirement Plan
GPO Box 5193
MELBOURNE VIC 3001

Pitcher Retirement Plan Pty Ltd (ABN 77 092 941 574) as trustee for the Pitcher Retirement Plan (ABN 15 828 677 472) is registered with the Australian Prudential Regulation Authority. MySuper Authorisation 15 828 677 472 277.