

3. How would you like to receive information from the fund?

A. Online email notification. Tick this box to provide your consent to receive information about your account and the Fund via email notification. You can also provide consent via the member login area of the website www.firststatesuper.com.au.

IMPORTANT: If you choose **A. Online email notification**, then information from the Fund, including your member benefit statements and notices of important changes to your super, will no longer be posted to you. Instead, you will receive an email notification sent to your email address informing you that information is available online and how you can access the information. You should make sure that your nominated email address is accurate and remains current. If you have already provided your email address, you should check your records via the member login area of the First State Super website to ensure that we have the correct email address. Alternatively, you can supply or update your email address in Section 2. You can withdraw your consent or change your nominated email address at any time via the member login area of the First State Super website, by completing a change of details form, or by calling Customer Service on 1300 650 873. You can also call Customer Service to request Fund information in hard copy (paper) format free of charge.

B. Paper excluding annual report. Tick this box if you would like to receive information from the Fund (except the annual report) in hard copy (paper) format free of charge. You will be notified by letter that the annual report is available online and how to access it.

C. Paper including annual report. Tick this box if you would like to receive ALL information from the Fund in hard copy (paper) format free of charge.

NOTE: If you DO NOT MAKE A CHOICE then **B. Paper excluding annual report** will apply.

4. Change the amount of your income stream payment

Complete this section to change the amount of income you would like to receive. Complete **Column A** to nominate the amount of income you would like to receive from your **retirement income stream** or **Column B** to nominate the amount of income you would like to receive from your **transition to retirement income stream**. For more information, see your Member Booklet.

The standard minimum amount that **MUST** be withdrawn is between 4% and 14% of your account balance, depending on your age. However, for the 2011-12 financial year, you may withdraw a temporary minimum amount that is 25% lower than the standard minimum amount.

Annual minimum payments for 2011-12

Age at start of pension (and at 1 July each year)	Under 65	65-74	75-79	80-84	85-89	90-94	95 and over
Standard minimum payment	4%	5%	6%	7%	9%	11%	14%
Temporary minimum payment for 2011-12	3%	3.75%	4.5%	5.25%	6.75%	8.25%	10.5%

The amount you nominate is a gross amount, ie. before any tax is deducted (if applicable). We will send you a letter in July each year advising the minimum amount you must withdraw and (if you have a TRIS) the maximum amount you may withdraw.

Column A – Retirement income stream	Column B – Transition to retirement income stream
There is no limit on the maximum amount that may be withdrawn from a retirement income stream.	The maximum amount that MAY be withdrawn is 10% of your account balance on 1 July of the financial year in which the withdrawal is to be made.
Choose one of the following options: <input type="checkbox"/> I would like to withdraw the standard minimum annual payment OR <input type="checkbox"/> I would like to withdraw the temporary minimum annual payment OR <input type="checkbox"/> I would like to withdraw the following amount per payment frequency which is above the minimum \$ <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"/>	Choose one of the following options: <input type="checkbox"/> I would like to withdraw the standard minimum annual payment OR <input type="checkbox"/> I would like to withdraw the temporary minimum annual payment OR <input type="checkbox"/> I would like to withdraw the maximum annual payment OR <input type="checkbox"/> I would like to withdraw the following amount per payment frequency which is between the minimum and maximum \$ <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"/>

5. Change of payment frequency

I would like to receive my income stream payments as indicated below. Please cross one of the following options:

Fortnightly (every second Wednesday)

Monthly (on the 12th day of the month)

Quarterly (on the 12th day of September, December, March and June)

Half-yearly on the 12th day of June and December. Alternatively, you may nominate the two months you prefer (six months apart) and payments will be made on the 12th day of those two months.

Record your nominated months here: AND

Yearly on the 12th day of June. Alternatively, you may nominate the month you prefer and payment will be made on the 12th day of that month.

Record your nominated month here:

6. Change the financial institution to which your payments are made

The bank account you nominate below will be credited with your income stream payments so please ensure the details are correct.

To ensure the security of your benefits, First State Super requires:

- a copy of the part of your financial institution statement or passbook that contains your full name, address and your financial account details **AND**
- proof of identity (see **Section 8**).

Account name

BSB number

Account number

Name of financial institution

Branch

7. Member declaration

- I have checked this form and confirm that it has been completed correctly and that the information/instructions I have provided are correct and in accordance with my wishes.
- I confirm that the information/instructions provided on this form are to replace any earlier information/instructions and that they are to remain in effect until I provide further information/instructions.

Signature

Date



Return the completed form to First State Super PO Box 1229 WOLLONGONG NSW 2500

If you have any further enquiries please call Customer Service on **1300 650 873** between 8:30 am and 5:30 pm AEST from Monday to Friday for the cost of a local call (unless calling from a mobile or pay phone).

Privacy notice

The information you provide on this form is collected by and held for First State Super by the fund Administrator, Pillar Administration, in accordance with the National Privacy Principles of the Privacy Act 1988 (Cth). For further information about privacy, please phone Customer Service on 1300 650 873 or visit www.firststatesuper.com.au to view the Privacy Policy.

8. Proof of identity requirements

In order to protect your benefit entitlement and privacy, you must provide certain **certified** documentation before the changes requested in this form can be processed.

If you have changed your **name**, we require a certified copy of **one** of the following documents:

- Marriage certificate OR
- Deed poll document OR
- Change of name certificate.

If you have changed your **date of birth**, we require a certified copy of **one** of the following documents:

- Birth certificate or birth card OR
- Passport OR
- Certificate of Australian citizenship OR
- Certificate of evidence of Australian residency OR
- Current RTA photo Driver's Licence.

If you have changed your **financial institution** details, we require a copy of that part of your financial institution statement or passbook that contains your full name, address and your financial account details **AND** a certified copy of one of the documents listed in Part A OR two of the documents listed in Part B.

Complete either Part A or Part B

Part A - Acceptable primary ID documents

Select ONE valid document from this section. Please cross **X** the document you are providing:

- Current Australian State/Territory driver's licence containing a photograph of the person
- Australian Passport (a passport that has expired within the preceding two years is acceptable)
- Card Issued under a State or Territory for the purpose of providing a person's age containing a photograph of the person
- Foreign passport or similar travel document containing a photograph and the signature of the person*

OR

Part B - Acceptable secondary ID documents

Select ONE valid document from this section. Please cross **X** the document you are providing:

- Australian Birth Certificate
- Australian citizenship certificate
- National identity card issued by a foreign government containing a photograph of the person in whose name the card was issued*

AND

ONE valid document from this section. Please cross **X** the document you are providing:

- A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address
- A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual) which contains the individual's name and residential address
- A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address)
- Foreign driver's licence that contains a photograph of the person in whose name it was issued and the individual's date of birth*
- Pension card issued by Centrelink
- Health card issued by Centrelink.

* Documents not written in English must be accompanied by an English translation prepared by an accredited translator.

Certification of personal documents

The person who is authorised to certify documents must sight the original and the copy and make sure both documents are identical, then make sure all pages have been certified as true copies by writing or stamping "certified true copy" followed by their signature, printed name, qualification (eg. Justice of the Peace, Australia Post employee, etc) and the date. The following people can certify copies of the originals as true and correct copies:

- a Justice of the Peace
- a person enrolled on the roll of a State or Territory Supreme Court or the High Court of Australia as a legal practitioner
- an Australian consular officer or an Australian diplomatic officer
- a judge of a court
- a magistrate
- a registrar or deputy registrar of a court
- a Chief Executive Officer of a Commonwealth court
- a permanent employee of Australia Post with five or more years of continuous service
- a finance company officer with five or more years of continuous service (with one or more finance companies)
- an officer with, or authorised representative of, a holder of an Australian Financial Services Licence (AFSL), having five or more years continuous service with one or more licensees
- a notary public officer
- a police officer
- Commissioner for Affidavits
- Commissioner for Declarations.