Use this form to make additional investments to your ADF Superannuation Fund account.

Macquarie ADF Superannuation Fund Additional investment form

MACQUARIE

Macquarie Investment Management Limited ABN 66 002 867 003 AFSL 237 492 RSEL L0001281
Macquarie ADF Superannuation Fund ABN 68 073 150 096 RSE R1004502

PLEASE USE BLACK INK

1. Client details

Account number (if known):

Given name(s)

Surname

Tax file number (if not already provided):

2. Investment type

Please confirm which investment type we are receiving by completing the relevant details in A, B or C below:

A) Contribution

Personal contribution $

Do you wish to lodge a notice of intent to claim a tax deduction for all/part of this contribution?

☐ **No** ☐ **Yes**. Amount (covered by this notice) I will be claiming as a tax deduction $

For the financial year ended 30 June 20

Employer contribution $

Spouse contribution $

Child contribution $

Other contribution $

Please specify the Other contribution type and attach appropriate documentation.

Please note:

We can not accept contributions made by you or someone on your behalf (other than your employer):

- if you have not provided your tax file number, or
- if the contribution is a non-concessional contribution that would exceed the level of the non-concessional contribution cap.

B) A rollover from another fund

Name of fund

Amount of rollover $

If you don't know the amount of rollover please leave blank.

Please ensure the necessary requirements of the other fund are met to have this rollover commenced.

C) Internal transfer of funds

Complete only if you are transferring these funds from another Macquarie investment.

Product name

Account number

How much are you transferring to the account listed in section 1?

☐ partial amount of $

☐ the entire balance (please note that this constitutes a request to withdraw from the above account).

3. Clients aged between 65 and 74

If aged 65 – 74

☐ I confirm that I have met the work test, by being gainfully employed for at least 40 hours in a period of not more than 30 consecutive days in the current financial year.

4. Confirmation and signature

I confirm that I have met the eligibility rules to contribute to superannuation (for information on these rules, refer to the *Are you eligible to invest?* section of the PDS).

If you are making a personal contribution for which you intend to claim a tax deduction by including a notice of intent to claim a tax deduction in Section 2A:

- I understand that if I choose to vary this notice, I cannot increase the amount I intend to claim as a tax deduction.

Signature (in black ink)

Name

Date

☐☐/☐☐/☐☐☐☐

Title

☐ Mr ☐ Mrs ☐ Miss ☐ Ms Other

1. Please make cheques payable to:
   MIML ADF [insert applicant's name], e.g. MIML ADF John Citizen
2. Send this form to:
   Macquarie Investment Management Limited
   GPO Box 1459
   Brisbane QLD 4001 (please affix stamp)

If you have any questions about completing this form please call us on **1800 806 310**.