Use this form to make a withdrawal/rollover from your ADF superannuation account.

Macquarie ADF Superannuation Fund Withdrawal/rollover form

MACQUARIE

Macquarie Investment Management Limited ABN 66 002 867 003 AFSL 237 492 RSEL L0001281
Macquarie Superannuation Fund ABN 65 508 799 106 RSE R1004496

PLEASE USE BLACK INK

1. Personal details

Title

☐ Mr ☐ Mrs ☐ Miss ☐ Ms Other

Phone number

Given name(s)

Surname

Account number

Mailing address (All statements and correspondence will be sent here)

☐ Use address on file ☐ Use address below

Street number and name or PO Box (Enter only your home or financial advisers address)

Suburb | State | Postcode | Country

2. Transaction type and value

2A. Transaction type:

☐ **Rollover**

☐ **Withdrawal**

For pension accounts, pay withdrawal as a:

☐ Pension payment

☐ Lump sum payment

If you do not make a selection we will assume **pension** payment for withdrawals and **lump sum** for account closures.

2B. Transaction amount

☐ **Partial withdrawal/rollover** for: $ and

☐ Net of fees and taxes (after fees and taxes have been deducted)

☐ Gross of fees and taxes

If you do not make a selection we will assume **net of fees and taxes**.

☐ **Full withdrawal/rollover and closure of the account**

Please note: For partial amounts, the minimum balance must be maintained or delays may be experienced (the minimums are $1200 for the Super Plan and $5000 for the Pension Plan).

* Please note: The Temporary Flood and Cyclone Reconstruction levy (Flood levy) tax may apply on withdrawals during the 2011/12 financial year. If you are exempt from the Flood levy you are required to provide the Flood levy exemption declaration form either prior or at point of requesting this withdrawal. If provided after the withdrawal has been completed an adjustment cannot be made.

Note: your withdrawal/rollover will be drawn proportionally across the tax components in your account.

3. If eligible, do you intend to claim a deduction on any personal contributions?

☐ No (proceed to next question) ☐ Yes (please complete below)

DEDUCTION NOTICES (OPTIONAL AND ONLY VALID FOR CONTRIBUTIONS MADE INTO THE ACCOUNT ABOVE)

Only complete if the withdrawal/rollover includes personal contributions for which you wish to lodge or vary a deduction notice. This will be taken to be a deduction notice in the ATO approved form. **Restrictions in tax law may prevent you from lodging or varying a deduction notice for contributions once a withdrawal has been processed.**

For contributions made in the current financial year

a) Contribution(s) made in the financial year ended 30 June 20
b) Personal contributions (covered by this notice) that I will be claiming as a tax deduction

$

c) Is this notice varying an earlier notice? ☐ Yes^ ☐ No

For contributions made in the prior financial year

a) Contribution(s) made in the financial year ended 30 June 20
b) Personal contributions (covered by this notice) that I will be claiming as a tax deduction

$

c) Is this notice varying an earlier notice? ☐ Yes^ ☐ No

If you do not make a selection we will assume you do not wish to lodge or vary a deduction notice.

^ The amount you intend to claim as a tax deduction cannot be greater than the amount stated in the earlier notice.

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4. Are you less than age 65 and accessing your preserved funds for either a lump sum withdrawal or to commence a pension/annuity?

If **NO**, please go to next question. If **YES**, please tick one of the following boxes.

If you are aged 55 to 59 inclusive:

☐ I have reached my preservation age and an arrangement under which I was gainfully employed has come to an end. I intend never to again become gainfully employed for 10 or more hours each week.

OR If you are aged 60 to 64 inclusive:

☐ An arrangement under which I was gainfully employed has come to an end on or after I attained the age of 60.

OR

☐ An arrangement under which I was gainfully employed has come to an end. I intend never to again become gainfully employed for 10 or more hours each week.

OR If you have met another condition of release:

☐ I am applying for a withdrawal under one of the conditions of release that allows me access to my superannuation. I have supplied the relevant documentation to enable to trustee to assess my application. For more information, please refer to the PDS.

5. Temporary residence

☐ Please cross this box only if you are or have been the holder of a temporary resident visa (other than a 'retirement' or 'investor retirement' visa) and are not an Australian citizen or permanent resident, or a New Zealand citizen.

Note: From 1 April 2009, the conditions of release under which you can access your benefits may be restricted. Please refer to your adviser or contact us for further information on temporary residents' conditions or release.

6. Special instructions

Please complete if you want to clarify any instructions

7. How would you like your rollover paid?

☐ **ROLLOVER TO A SELF MANAGED SUPERANNUATION FUND (SMSF)**

Super fund name/account name

ABN

For ETF payments please attach a PDF bank statement that is less than 6 months old for validation purposes. Please ensure the account number, BSB and name are clearly visible (screen shots and transaction receipts are not acceptable).

☐ Payment via cheque

Deliver cheque to:

☐ Payment via EFT

☐ Copy of bank statement attached (not required for credits into Macquarie accounts)

BSB number

Account number

☐ **ROLLOVER 1 TO A SUPERANNUATION FUND**

Rollover institution

ABN

SPIN

Rollover value

Amount

☐ Full balance $

Funds will be sent by cheque only.

Make cheque payable to:

Deliver cheque to:

☐ **ROLLOVER 2 TO A SUPERANNUATION FUND**

Rollover institution

ABN

SPIN

Rollover value

Amount

☐ Full balance $

Funds will be sent by cheque only.

Make cheque payable to:

Deliver cheque to:

(Optional) If you wish to nominate specific preservation amounts, please show this in the special instructions area on page 2. If you do not make a selection your rollover will be drawn pro rata across all your preservation amounts.

Continued on next page

8. How would you like your withdrawal paid?

Only complete this section if you are requesting that your payment amount be withdrawn from superannuation and paid to you.

Cheque payee:

☐ Posted to the address in section 1 (cheques will be posted unless otherwise indicated)

☐ Posted to the address notified in special instructions on page 2

☐ I will collect from ______ office on

___ / ___ / ______ (cheques available after 2.30pm Sydney time)

☐ Deposited into my bank, building society or credit union account on your record

☐ Deposited into my bank, building society or credit union account nominated below

Bank, Building society or credit union name

BSB

Account number/membership number

Account name

9. Declaration

If you have completed the deduction notice in section 3 and you have not previously lodged a notice with the fund for these contributions.

I confirm:

- I am lodging this/these notice/s before both of the following dates:
  - the day that I lodged my income tax return for the year stated for the respective contribution(s), and
  - the end of the income year after the year stated for the respective contribution(s)
- at the time of completing this notice:
  - I intend to claim the personal contributions stated in the deduction notice (in section 3) above as a tax deduction
  - the trustee has not begun to pay a pension based in whole or part on these contributions
  - I have not included these contributions in an earlier notice
  - the fund still holds these contributions,
- I understand that I many not be able to vary this notice after the withdrawal/rollover has occurred
- the information given on this form is correct and complete.

If you have completed the deduction notice in section 3 and have already lodged a notice with the fund for these contributions and wish to reduce the amount stated in that notice.

I confirm:

- I intend to claim the personal contributions stated in the deduction notice in section 3 above as a tax deduction.
- I wish to vary my previous notice for these contributions by reducing the amount I advised in my previous notice. I confirm that either:
  - I have not yet lodged my income tax return for the year stated for the contribution and this variation notice is being lodged on or before 30 June of the following financial year, or
  - the Tax office has disallowed my claim for a deduction for the relevant year stated for the respective contribution and this notice reduces the amount stated in my previous notice by the amount that has been disallowed.

By signing this request form I am making the following statements:

- If the destination fund is a self managed superannuation fund (SMSF), I confirm that I am a member of the SMSF
- I have reached my preservation age or have met another condition of release, entitling me to access my superannuation benefit, or
- I have completed the retirement declaration in section 4, or
- if I am rolling over my superannuation benefit to another complying superannuation fund, I discharge the trustee, Macquarie Investment Management Limited, from any further liability in respect of my superannuation benefit once the rollover has been completed
- I am aware that I may ask for information to understand any benefit entitlements that I may have, including information about any fees or charges that may apply to the rollover, or information about the effect of the rollover on any benefit entitlements I may have, and I do not require any further information, and
- I authorise the deduction of any withdrawal and/or termination fees that may be applicable as a result of the withdrawal.

Signature (in black ink)

Name

Date ___ / ___ / ______

If signing under power of attorney, the attorney certifies that they have no notice of the revocation of the power.
Please supply a certified copy of the power of attorney.

1. Please ensure your client's sign the form
2. Retain a copy for your records
3. Send this form to:
   Macquarie Investment Management Limited
   Reply paid 192
   Australia Square NSW 121
   Fax: 1800 550 140

If you have any questions about completing this form please call us on **1800 801 651**.