

295-390 Pension Certificate Request Form and Requirements

Please fill in the blocked areas below.

The certificate will be addressed to the Fund Trustees c/o the contact person below

Fund details

Fund Name:

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Financial year the certificate is required for:

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Supplier details

Tick if details are same as prior certificate

Unchanged from previous certificate

or

Trustees: (Full names of individual trustees, or Name and ACN for corporate trustee)

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Superannuation Fund Number or ABN:

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Contact person:

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Company:

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Address:

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Email address:

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Phone:

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Member & pension details

First Member

Second Member [optional]

Name:

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Gender (Male/Female):

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Date of birth:

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Pension commencement (if applicable):

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Pension type (if applicable):

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Pension paid (\$ pa):

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Other information required:

- Statements of Financial Position and Performance
- Members Statements at review date
- Dates of ETP, Pension or Contribution payments

Send to:

or

Email to:

CUMPSTON SARJEANT
LEVEL 13, 160 QUEEN ST
MELBOURNE VIC 3000

certificates@cumsar.com.au