

Transfer Form

OneAnswer Frontier Pension

1 February 2020

OnePath Custodians Pty Limited (OnePath Custodians)
ABN 12 008 508 496 AFSL 238346 RSE L0000673
Retirement Portfolio Service (Fund)
ABN 61 808 189 263 RSE R1000986

Customer Services
Phone 133 665
Email client@onepathsuperinvest.com.au
Website onepath.com.au

Instructions

- **Please forward this form to your existing financial institution to transfer funds from a non-OnePath superannuation fund to the Retirement Portfolio Service.**
- If you want to transfer more than one fund, please photocopy this form. You may be requested by your existing fund to forward details or sign additional documents. Please action this as soon as possible. Please be aware that other financial institutions may impose a fee when you withdraw from their fund. There may also be delays in having your money transferred from your existing fund.
- To prevent delays in your transfer, please ensure all details are completed and attach your most recent statement from your existing fund as well as proof of identity (see section 2).

Important information:

If you wish to claim a tax deduction or request a contributions split, you must do so prior to rolling out of your existing fund (including if you are transferring between OnePath superannuation funds) by completing a Notice of Intent to Claim a Tax Deduction or Superannuation Contributions Splitting Application Form. Please note a tax deduction for personal contributions may only be allowed on a proportional basis where we receive a 'Notice of intent to claim a tax deduction for super contributions' after we have paid a partial withdrawal or rollover. Please contact the financial institution from which you are transferring to request the appropriate form.

We are required to give your tax file number to the fund transferring your benefit to us. If you do not want us to do this, please notify us in writing.

Moving funds (including terminal medical condition payments) may have taxation, investment and insurance implications, we recommend you consult with your adviser.

1. Applicant details

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Dr <input type="checkbox"/>	Other <input type="text"/>
Surname	<input type="text"/>					
Given name(s) (including middle name)	<input type="text"/>				Date of birth (dd/mm/yyyy)	<input type="text"/> / <input type="text"/> / <input type="text"/>
Residential address (this cannot be a PO Box)	<input type="text"/>					
Suburb/Town	<input type="text"/>			State	<input type="text"/>	Postcode <input type="text"/>
Country	<input type="text"/>			Contact phone	<input type="text"/>	
Tax file number	<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"/> <input type="text"/> <input type="text"/> <input type="text"/>	

Please refer to the section titled 'Providing your tax file number (TFN)' in the OneAnswer Frontier Personal Super and Pension PDS before providing your TFN.

2. Proof of identity

☐ I have attached a certified copy of my current driver's licence or passport **or**

I have attached certified copies of **both**:

☐ Birth/Citizenship Certificate or Centrelink Pension Card **and**

☐ Centrelink payment letter or Government notice* (less than one year old) with name/address.

* Notice issued by Commonwealth, State or Territory within the past 12 months that contains your name and residential address. For example:
– Tax Office Notice of Assessment.

From

total value **or** partial value \$, .

Financial institution

Fund name																									
Unique Superannuation Identifier	<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"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Member/Policy number	<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"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address of paying institution																									
Suburb/Town	<input type="text"/>												State	<input type="text"/>	Postcode	<input type="text"/>									
Country																									
Phone number of paying institution	<input type="text"/>																								

Name of employer

Date ceased employment / / (dd/mm/yyyy)

To

Financial institution

Fund name	RETIREMENT PORTFOLIO SERVICE		
Unique Superannuation Identifier	MMF0333AU		
Address of receiving institution	GPO BOX 5306		
Suburb/Town	SYDNEY	State	NSW
		Postcode	2001
Country	AUSTRALIA		
Phone number of receiving institution	133 665		

- I hereby give authority to you to provide all relevant information and any other documentation to the Trustee of the Retirement Portfolio Service and my financial adviser regarding the transfer amount.
- I understand that the trustee of my previous fund is discharged from any liability in respect of any amount transferred.
- I approve the deduction of any applicable transfer fees, exit fees and taxes from the benefit being transferred (subject to legislative restrictions).
- 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 do not require any further information.
- I authorise the transfer of any contribution still to be made by my previous employer that may be received after my benefits have been transferred to the Retirement Portfolio Service.
- I understand that, in certain circumstances, the Trustee of the Retirement Portfolio Service may be required to deduct tax from the untaxed element of any amount transferred.
- I consent to the collection, use, storage and disclosure of my personal information (including health and other sensitive information) as described in OnePath Custodians' Privacy Policy which is available at onepath.com.au/superandinvestments/privacy-policy If I have provided information about another person in this application (for example, a life insured), I declare that I have the consent of that person to do so. I understand that OnePath Custodians requires me to inform the person concerned that I have done so and direct them to the Privacy Policy which is located at onepath.com.au/superandinvestments/privacy-policy so they may understand the manner in which their personal information (including health and other sensitive information) may be used and disclosed by OnePath Custodians.
- To the best of my knowledge, my other superannuation fund(s) is a complying superannuation fund under the *Superannuation Industry (Supervision) Act 1993*.
- Retirement Portfolio Service is a regulated and complying superannuation fund under the *Superannuation Industry (Supervision) Act 1993*.

Signature of applicant

X	
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Date (dd/mm/yyyy)

/	/
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Letter of Compliance

OneAnswer Frontier Personal Super and Pension

1 February 2020

OnePath Custodians Pty Limited

To whom it may concern,

I confirm the following statements on behalf of OnePath Custodians Pty Limited (**Trustee**), the trustee of Retirement Portfolio Service (**Fund**).

Complying superannuation fund

The Fund is a complying, resident, regulated superannuation fund under the *Superannuation Industry (Supervision) Act 1993 (SIS Act)*. The Fund is not subject to a direction under section 63 of the *SIS Act*, nor does it expect to receive such a direction.

Contributions

The Fund is able to accept superannuation guarantee contributions as well as other additional employer contributions.

The trust deed governing the Fund also allows benefits to be transferred from other resident regulated superannuation funds into the Fund, and allows benefits to be transferred or rolled over from the Fund to other resident regulated funds.

Members may only cash preserved benefits in circumstances permitted by the *SIS Act*.

The trustee of the transferring fund or life company is required to make its payment in accordance with the relevant laws and standards.

Further details

Further details relating to the Fund appear in the table below.

Fund details	
Fund name	Retirement Portfolio Service
Australian Business Number (ABN)	61 808 189 263
Unique Superannuation Identifier (USI)	OneAnswer Frontier Personal Super MMF0334AU OneAnswer Frontier Pension MMF0333AU
Fund contact details	Customer Services GPO Box 5306 Sydney NSW 2001 Telephone 133 665 weekdays between 8:30am and 6:30pm (AEST) Email client@onepathsuperinvest.com.au Website onepath.com.au