

INSTRUCTION FORM: SUPERANNUATION FUND UPDATE

YOUR DETAILS

I am _____ an advisor to an individual seeking to update my superannuation fund
_____ an individual seeking to update my superannuation fund

Full name

Address

Phone

Email

DETAILS OF ORIGINAL SUPERANNUATION FUND

Once you submit this form, please attach your original Superannuation Fund to the return email.

Alternatively, please forward to:

Shelfdocs
GPO Box 467
ADELAIDE SA 5001

Please note the original superannuation fund is required before any documents can be finalised.

Name of fund

Date of trust deed

Address

CURRENT TRUSTEE

Trustee #1

The trustee is _____ a company _____ an individual

Full name/Company name

ACN (if applicable)

Address/Registered office address

Directors (if applicable)

Full name(s)

Registered office address

Trustee #4

The trustee is a company an individual

Full name/Company name

ACN (if applicable)

Address/Registered office address

Phone

Facsimile

Directors (if applicable)

Full name(s)

Registered office address

DETAILS OF UPDATES (IF ANY)

(Please forward to our office)

Update #1

Type of update (e.g. change of Trustee, Update etc): _____

Date of deed: _____

Update #2

Type of update (e.g. change of Trustee, Update etc): _____

Date of deed: _____

If you have additional changes, please include all relevant details in the textbox at the end of this form.

PARTICIPATING EMPLOYER
(if applicable)

Company name

Address

MEMBERS

Member #1

Full name

Address

Date of birth

Member #2

Full name

Address

Date of birth

Member #3

Full name

Address

Date of birth

Member #4

Full name

Address

Date of birth

If you have additional members, please include all relevant details in the textbox at the end of this form.

Are there any other instructions we should know (including additional trustees etc)?

BILLING

Your chosen payment method:

Cheque in mail

Direct deposit

Bankcard

Mastercard

Visa

Please send me an invoice, which I agree to pay within 14 days

Card number

Name of cardholder

Expiry date

Direct deposit details:

National Bank Australia (Pirie Street)

BSB: 085-005 Account: 525 554 575

Reference: "Shelfdocs [INSERT YOUR COMPANY NAME HERE]"