



FuturePlus
Super

Allocated Pension Plan

Transfer-in Authority (from an external fund)

Please complete in capital letters and in BLACK INK only

This form is to be completed if you would like to transfer monies to your FuturePlus Super Allocated Pension Plan.

Upon receipt of this form, we will forward it to your previous super fund – as per the authorisation supplied by you in Section 3. "Instructions to previous fund trustee".

1. Your details

Member no.	<input type="text"/>	Date of birth (dd/mm/yyyy)	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
Title	<input type="text"/> (e.g. Mr/Mrs/Ms/Miss/Dr)						
Family name	<input type="text"/>						
Given name(s)	<input type="text"/>						
Street/PO Box no.	<input type="text"/>						
Suburb/Town/City	<input type="text"/>						
State/Territory	<input type="text"/>	Postcode	<input type="text"/>	Country (if outside Australia)	<input type="text"/>		
Phone: Home no. (inc. STD/ISD)	<input type="text"/>			Business no. (inc. STD/ISD)	<input type="text"/>		
Mobile no.	<input type="text"/>			Fax no. (inc. STD/ISD)	<input type="text"/>		
E-mail address	<input type="text"/>						

2. Previous fund details

Please provide the following information. You may need to contact your previous fund or check your last fund statement.

Fund name	<input type="text"/>						
<input type="text"/>							
Address of the Fund Administrator or Trustee	<input type="text"/>						
<input type="text"/>							
<input type="text"/>							
Policy/ Membership no.	<input type="text"/>						
Phone no. (inc. STD/ISD)	<input type="text"/>			Fax no. (inc. STD/ISD)	<input type="text"/>		



