

SUPER FUND**Colonial**
First State**NOMINATION FORM**

SAVE FORM

PRINT FORM

Complete this form and hand it to your employer to ensure your super contributions are made into your Colonial First State account.

1 YOUR DETAILS

Name

Employee number (if applicable)

2 YOUR SUPER ACCOUNT DETAILS

Super fund name

Product name

Account name

Account number

(Note to employer/payroll: if making EFT payment only use the last nine digits of the account number)

Signature

Date signed

Information for employers

Payment information: EFT or BPay contributions are accepted visit www.colonialfirststate.com.au/payment for details

Complying fund statement: FirstChoice Wholesale Personal Super is part of the Colonial First State FirstChoice Superannuation Trust ('the Fund'). The Fund is a complying, resident, regulated superannuation fund and is constituted under a trust deed dated 29 April 1998. The trustee of the Fund is Colonial First State Investments Limited ('the trustee'). In the event that the Fund's complying status was revoked the trustee would receive notice to that effect under section 63 of the Superannuation Industry (Supervision) Act. The trustee confirms that it has not received nor does it expect to receive any such notice. The trustee accepts all mandated categories of employer contributions including Super Guarantee and those specified under awards or employment contracts, and voluntary employer contributions including additional employer or salary sacrifice contributions.

Fund ABN: 26 458 298 557

Fund USI: FSF0511AU