Superannuation Standard choice form

For use by RACGP when offering Individual/Sole trader contractors a choice of fund and by Individual/Sole trader contractors to advise RACGP of their chosen fund.

Return the completed form as soon as possible to finance@racgp.org.au

Se	ection A:	Individual/Sole tra	der con	tractor to	comple	ete	
1		superannuation (super)fund	ha matal tay of	-1	f th - h	h -l	
	request that	all my future super contributions	be paid to: (p	place an [X] in on	e of the box	es below)	
	The APRA	fund or retirement savings accour	nt (RSA) I nom	inate Comple	te items 2, 3	and 5	
		The self-managed superfund (S	SMSF) I nominat	te) Complete it	ems 2, 4 and	15	
	The super	fund nominated by RACGP (in sec	tion B) Co	omplete items 2 an	d 5		
2	Your details	s		_			
	First Name			Last Name			
	RACGP No			Gender			
	Tax file numb	er (TFN)		Date of Birth		I	
	↑ Variate	and because to assert TEN best W					'ala a nata
		not have to quote your TFN but if lso helps you keep track of your s					
•	Newstration	ADDA (L DOA					
3	_	g your APRA fund or RSA current details from your APRA re	aulated fund or	RSA to complete t	his item.		
	FundABN		9				
	Fund name						
	Fund address						
	Suburb/town					State/territory	Postcode
	Fund phone						
	Unique supera	annuation identifier (USI)					
	Your account	t name (if applicable)					
	Your membe	r number (if applicable)					
	Required do	cumentation					

Sensitive (whencompleted)

You need to attach a letter from your fund stating that they are a complying fund and that they will accept contributions from

RACGP. Correct information about your super fund is needed for RACGP to pay super contributions.

Nominating your self-managed super fund (SMSF) You will need current details from your SMSF trustee to complete this item.
FundABN
Fund name
Fund address
Objects to see the second of t
Suburb/town State/territory Postcode
Fund phone
Fund electronic service address (ESA)
Fund bank account
BSB code (please include all six numbers)
Required documentation You need to attach a document confirming the SMSF is an ATO regulated super fund. You can locate and print a copy of the compliance status for your SMSF by searching using the ABN or fund name in the Super Fund Lookup service at http://superfundlookup.gov.au/
If you are the trustee, or a director of the corporate trustee you can confirm that your SMSF will accept contributions from RACGP by making the following declaration (place an 'X' in the box below):
I am the trustee, or a director of the corporate trustee of the SMSF and I declare that the SMSF will accept contributions from RACGP.
If you are not the trustee, or a director of the corporate trustee of the SMSF, then you must attach a letter from the trustee confirming that the fund will accept contributions from RACGP.
Signature and date
If you have nominated your own fund in Item 3 or 4, check that you have attached the required documentation and then place an 'X' in the box below.
I have attached the relevant documentation.
Signature
Date Day Month Year
Return the completed form as soon as possible to finance@racqp.org.au

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	d date the form when you give it to Contractor.
3igir and	date the form when you give it to Contractor.
Your details	
Business name	The Royal Australian College of General Practitioners Ltd
ABN	34000223807
Signature	Date
	Day Month Year
Your nomina	ted super fund
	does not choose their own super fund, you are required to pay super contributions on their behalf to the fund ominated below:
Super fund nar	ne AMP Superannuation savings Trust
Unique superan	nuation identifier (USI) AMP 0 2 7 7 AU
Phone (for the	product disclosure statement for this fund) 1 3 0 0 6 5 3 4 5 6
Super fund wel	osite address www.amp.com.au/customsuper
ction C: F	RACGP to complete
	RACGP to complete e this section when your contractor returns the form to you with section A completed.
Complete	e this section when your contractor returns the form to you with section A completed.
Complete Record of change In the two mont	e this section when your contractor returns the form to you with section A completed. oice acceptance hs after you receive the form from your contractor you can make super contributions to either the fund you e fund the contractor nominated. After the two month period, you must make payments to the fund chosen
Record of ch In the two mont nominated or th by the contractor	e this section when your contractor returns the form to you with section A completed. oice acceptance hs after you receive the form from your contractor you can make super contributions to either the fund you e fund the contractor nominated. After the two month period, you must make payments to the fund chosen or. n't meet your obligations, including paying your contractor superannuation contributions to the correct fund,
Complete Record of ch In the two mont nominated or th by the contractor If you do	e this section when your contractor returns the form to you with section A completed. oice acceptance hs after you receive the form from your contractor you can make super contributions to either the fund you e fund the contractor nominated. After the two month period, you must make payments to the fund chosen or. n't meet your obligations, including paying your contractor superannuation contributions to the correct fund, penalties. Date you action Date you action

PRIVACY STATEMENT

Section B: RACGP to complete

RACGP is authorised to collect contractor's TFN under the *Superannuation Industry (Supervision) Act 1993*. It is not an offence for a contractor not to quote their TFN. However, quoting a TFN reduces the risk of administrative errors and if the contractor does not quote their TFN their contributions may be taxed at a higher rate. Contractor can get more details regarding their privacy rights by contacting their superannuation fund.

Office, the RACGP's nominated fund or the Contractor's nominated fund.