# **CHOICE OF FUND**

1. CHOSEN FUND DETAILS



Where your super should be paid is your choice. From 1 November 2021, if you start a new job and you do not advise your employer of your choice of super fund by completing this form, most employers will need to check with the ATO if you have an existing super account to pay your super into. It's easy to choose, simply complete this form and hand it to your employer so they can pay your contributions into your existing account.

Fund name:					
Member number: (if you are an existing member)					
Member name:					
Fund ABN: (Australian Business Number)	24 496 637 884	USI: (Unique Superannuatio	n Identifier)		
2. MAKE ADDITIONAL C	ONTRIBUTIONS TO	MY SUPER			
If you'd like to make extra	Please use ( $\checkmark$ ) to mark the appropriate option(s) and enter the contribution amount below:				
contributions to your super from your pay, please complete this section.	Concessional contributions				
	Optional employer cc	Optional employer contributions (pre-tax or salary sacrifice*)			
Please note: There are limits to the amount of contributions that you or your employer can make to your super. There may be penalties if you	How much do you want y	our employer to deduct from	n your gross sala	ary or wages?	
	\$	per	week	fortnight	month
	Non-concessional contri	Non-concessional contributions			
exceed these limits. Contact us for more information.	Optional member contributions (after tax)				
as for more imormation.	How much do you want deducted from your net salary/wages?				
	\$	per	week	fortnight	month
	*Optional employer contr	ibutions are subject to emplo	oyer's agreeme	nt.	
3. AUTHORISATION					
I request that all future employer	contributions are to be ma	de to the fund specified in	section 1 of th	nis form.	
Employee name:					
Employee payroll number: (if applicable)					
Tax file number*:					
* An employer is authorised to colle You do not have to provide your TI Your TFN also helps you keep track	FN but if you do not provide	it, your contributions may be	e taxed at a hig	her rate.	
You must sign and date this form an	nd give it to your employer fo	or their records.		7	
				Date:	
Signature:				Date.	

# **CHOICE OF FUND**



## Note to employers:

If an employee does not choose their own super fund, and the ATO has advised the employee does not have a stapled super fund (for new employees from 1 November 2021), you can meet your SG obligations by paying super guarantee contributions on their behalf to the fund nominated above or another fund that meets the choice requirements.

The required letter of compliance and ways you can contribute into Active Super (part of Vision Super) are located on the next page.

<u> </u>	Employer use only
Date accepted	Date processed

## **NOTE FOR EMPLOYERS**



### **VISION SUPER IS ONE OF AUSTRALIA'S OLDEST SUPER FUNDS.**

We are an industry super fund, that has been supporting workers with super since 1947.

Our focus is improving your returns and keeping your fees and costs low to help you grow your retirement benefits.

Active Super is part of Vision Super.

### LETTER OF COMPLIANCE

#### To whom it may concern:

This is to certify that:

- The Local Authorities Superannuation Fund (also known as Vision Super), is a complying superannuation fund (Registration Number R1000603) within the meaning of the Superannuation Industry (Supervision) Act 1993 ("SIS Act").
- The Trustee of the Fund is Vision Super Pty Ltd (ABN 50 082 924 561), holder of Australian Financial Services Licence 225054 and RSE Licence Number L0000239.
- The Fund is a resident regulated superannuation fund within the meaning of the SIS Act and has never received a notice of non-compliance from the Australian Prudential Regulation Authority (APRA).
- The Fund is able to accept superannuation contributions for eligible persons. These contributions are maintained and subsequently paid only in accordance with the Superannuation Industry (Supervision) Regulations 1994.
- The Fund is not subject to, and has never previously been subject
  to, a direction under section 63 of the SIS Act. The Fund offers
  insurance cover that meets the minimum requirements of the
  Superannuation Legislation Amendment (Choice of Superannuation
  Funds) Act 2004, for a fund to be offered by an employer where an
  employee does not choose a fund.

Details of how an employer can make contributions to the Fund are provided below.

Yours sincerely,

Noelle Kelleher Company Secretary Vision Super Pty Ltd

#### Acting on your employees' choice

### Payment of contributions

New employees from 1 November 2021:

If you haven't received a completed form from a new employee and a super contribution is due, to avoid penalties you must request the employee's stapled super fund from the ATO and make the payment to that fund by the due date.

- If the ATO advises the employee does not have a stapled super fund, you can make the payment to your nominated default super fund or another fund that meets the choice of fund rules.
- In the two months after you receive a new employee's completed form, super contributions should be made to the employee's chosen fund or their stapled super fund. You can only make contributions to your nominated fund if the employee has not chosen a fund and the ATO advises there is no stapled super fund.

#### Existing employees:

- For existing employees that started before 1 November 2021, in the
  two months after you receive their completed form you can pay
  their super contributions to either their current fund or the new
  fund they have nominated.
- After the two month period you must make super guarantee contribution payments to the new fund your employee nominated.
- You do not have to action an employee's fund nomination if they have nominated a fund in the previous 12 months; however, you may choose to action their request.

If your employee provides their TFN on this form, you have an obligation to inform the super fund of the employee's TFN when you next make a contribution for the employee.

#### Record keeping

You must keep records, in English, of your employee's choice of super fund and receipts or other documents issued by the fund detailing your contributions. Records must be kept for 5 years.

You also need to keep proof that the fund you are contributing to is a complying super fund. The required letter of compliance for Vision Super is included on this form.

#### Making contributions to Active Super (part of Vision Super)

Vision Super provides a number of ways to make your super contributions to suit your business needs:

Contribution options	How it works	Payment options	
Employer Online	All your contribution details are provided via our secure website	<ul><li>BPAY</li><li>Direct Debit</li><li>EFT</li><li>Cheque</li></ul>	
ВРАУ	Contact us for contribution BPAY codes	ВРАУ	
Clearing house	Manage your contribution data across all your employees' super fund choices in one online location	Direct Debit authorisation required	
Manually	Complete and post contribution Form 39AS	Cheque	

Contact us:
Phone: Employer Services team – 1300 547 873
Email: employerservices@activesuper.com.au
Website: activesuper.com.au
Address: PO Box 18041, Collins Street East, Melbourne VIC 8003
Vision Super Pty Ltd ABN 50 082 924 561 AFSL 225054, is the Trustee of the Local Authorities Superannuation Fund ABN 24 496 637 884