Account consolidation form



1. Member details								Page 1 of
Member number:								
Title:	Ms Mrs Miss	Mr Mx					О	ther
Surname:								
Given name/s:						Date of I	birth.	
Residential address:						Jule		
			Cto	t a .			Dostood	
Suburb:			Sta				Postcod	e: [
Contact phone number:			Mo	bile numb	er:			
2. Account to be con	nsolidated							
Please complete:								
						-		
3. Destination accou	unt for consolidation							
Active Super Saver	Active Super Choice							
Please choose from ONE of I wish to have my trans OR	to have your transfer and the following options: If the following options: If the following options: If the following options: If the following options is the following options is the following options in the following options: If the following options:	g investment option	n(s) in my de	estination a	ccount.			
INVESTMENT OPTIONS		PERCEN	ITAGE ALLOC	ATION	Please i	note:		
Premixed options							ent option	
Conservative				%			account v instruction	vill remain ons only
Conservative balanced				%	apply to	the tran	sfer amou	ınt.
Balanced Lligh growth				%				
High growth Single sector option				%				
Cash				%				
	oduct (Active Super Saver only)			%				
		TOTAL	1	00%				
E Declaration (mus	t be completed)							
 I have read and conside I understand that Vision I understand that this in and will be protected in 	n this form are true and correct and ered the relevant Product Disclosure in Super will endeavour to put this conformation is required for the sole paraccordance with the provisions of collection Statement at visionsuper.	e Statement provid hange into effect vourpose of the man the <i>Privacy Act 19</i> 8	led to me for within five bu naging of sup	my destin usiness day perannuatio	ation acco s. on benefi	ount. ts and ent	itlements e read our	
Signature			Date					
Jignature			Date					
	IMPORTANT: SEND Nase post the original form to: Vision and upload a scanned copy or pho	on Super, PO Box 1	8041, Collins	Street Eas	t, Melbou	ırne VIC 8		

Contact Us								
Contact Centre: 1300 300 820	memberservices@visionsuper.com.au	visionsuper.com.au						
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								