



# Choice of superannuation fund Choice nomination form

Once you have completed this form, give the form to your employer, who will require the information on the following pages.

When completing this form, please ensure you use all capital letters eg    and check boxes with a cross eg

## Part A:

I request that all future superannuation guarantee (SG) contributions be made to the following superannuation fund:

Fund name	<input type="text" value="F"/> <input type="text" value="I"/> <input type="text" value="R"/> <input type="text" value="S"/> <input type="text" value="T"/> <input type="text" value="S"/> <input type="text" value="T"/> <input type="text" value="A"/> <input type="text" value="T"/> <input type="text" value="E"/> <input type="text" value="S"/> <input type="text" value="U"/> <input type="text" value="P"/> <input type="text" value="E"/> <input type="text" value="R"/> <input type="text" value="A"/>
	<input type="text" value="N"/> <input type="text" value="N"/> <input type="text" value="U"/> <input type="text" value="A"/> <input type="text" value="T"/> <input type="text" value="I"/> <input type="text" value="O"/> <input type="text" value="N"/> <input type="text" value="S"/> <input type="text" value="C"/> <input type="text" value="H"/> <input type="text" value="E"/> <input type="text" value="M"/> <input type="text" value="E"/>
Australian Business number (ABN)	<input type="text" value="5"/> <input type="text" value="3"/> <input type="text" value="2"/> <input type="text" value="2"/> <input type="text" value="6"/> <input type="text" value="4"/> <input type="text" value="6"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="6"/> <input type="text" value="5"/>
Unique Superannuation Identifier (USI)	<input type="text" value="5"/> <input type="text" value="3"/> <input type="text" value="2"/> <input type="text" value="2"/> <input type="text" value="6"/> <input type="text" value="4"/> <input type="text" value="6"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="6"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/>
Product Name	<input type="text" value="V"/> <input type="text" value="I"/> <input type="text" value="C"/> <input type="text" value="S"/> <input type="text" value="U"/> <input type="text" value="P"/> <input type="text" value="E"/> <input type="text" value="R"/>
	<input type="text" value="F"/> <input type="text" value="U"/> <input type="text" value="T"/> <input type="text" value="U"/> <input type="text" value="R"/> <input type="text" value="E"/> <input type="text" value="S"/> <input type="text" value="A"/> <input type="text" value="V"/> <input type="text" value="E"/> <input type="text" value="R"/>
Postal address	<input type="text" value="G"/> <input type="text" value="P"/> <input type="text" value="O"/> <input type="text" value="B"/> <input type="text" value="O"/> <input type="text" value="X"/> <input type="text" value="8"/> <input type="text" value="9"/>
	<input type="text" value="M"/> <input type="text" value="E"/> <input type="text" value="L"/> <input type="text" value="B"/> <input type="text" value="O"/> <input type="text" value="U"/> <input type="text" value="R"/> <input type="text" value="N"/> <input type="text" value="E"/>
	Postcode <input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="1"/>
Daytime phone number	<input type="text" value="1"/> <input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="6"/> <input type="text" value="6"/> <input type="text" value="2"/> <input type="text" value="1"/> <input type="text" value="6"/>
Website	<input type="text" value="V"/> <input type="text" value="I"/> <input type="text" value="C"/> <input type="text" value="S"/> <input type="text" value="U"/> <input type="text" value="P"/> <input type="text" value="E"/> <input type="text" value="R"/> <input type="text" value="."/> <input type="text" value="C"/> <input type="text" value="O"/> <input type="text" value="M"/> <input type="text" value="."/> <input type="text" value="A"/> <input type="text" value="U"/>

## My account details Please complete

Payroll number (if known)	<input type="text"/>
VicSuper member number	<input type="text"/>
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other (please specify) <input type="text"/>
Surname	<input type="text"/>
Given name/s	<input type="text"/>
Phone number	<input type="text"/>
Email	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>

## Not sure of your account details?

If you are an existing member, you can either check your:

- Benefit Statement, or
- if you have recently joined, your welcome letter.

Alternatively, you can contact VicSuper's Member Centre on 1300 366 216.

---

## Part B: Information for employers

### **Making contributions to VicSuper**

Your employee has chosen to have their super paid into VicSuper FutureSaver. VicSuper is a division of First State Superannuation Scheme and is a complying super fund that can accept superannuation contributions.

The letter on the following page issued by FSS Trustee Corporation, the corporate trustee of First State Superannuation Scheme confirm the Fund is a complying super fund.

### **Becoming a First State Super participating employer**

There is no cost to become a First State Super participating employer. Your employee may then be registered with an VicSuper EmployeeSaver account and you will have full access to the Fund's employer services including VicSuper EmployersOnline. The Fund does not impose any additional requirements on its participating employers outside of what you are required to do in order to meet legislative superannuation obligations. For example, we do not require our participating employers to make monthly contributions to the Fund.

It is important to note that you do not have to become a participating employer to pay superannuation guarantee for your employees. Your employee can join the Fund themselves as a PersonalSaver member and you can contribute to that account. However, non-participating employers do not have access to VicSuper EmployersOnline.

To join First State Super Scheme as a participating employer, visit [vicsuper.com.au/employer](http://vicsuper.com.au/employer) or call **1300 878 737**.

---

## How to make payments

The Fund accepts contributions from third party clearing houses. Participating employers can contribute directly to the Fund through VicSuper EmployersOnline.

Please contact your account consultant on **1300 878 737** if you would like more information about making payments.



1 July 2020

To whom it may concern

**Letter of confirmation of complying fund status – VicSuper FutureSaver product (part of the VicSuper division of the First State Superannuation Scheme)**

FSS Trustee Corporation (ABN 11 118 202 672) (**Trustee**) has issued this letter in its capacity as trustee of the First State Superannuation Scheme (ABN 53 226 460 365). The Trustee holds an Australian Financial Services Licence (293340) under the *Corporations Act 2001*.

This notice confirms that the First State Superannuation Scheme (**First State Super**):

- is a resident regulated superannuation fund within the meaning of the *Superannuation Industry (Supervision) Act 1993 (SIS Act)*;
- is not subject to a direction under section 63 of the SIS Act;
- is authorised to offer a MySuper product, meeting all the standards for fees and costs, investment options, insurance and member communication;
- all contributions and rollovers for the VicSuper FutureSaver product should refer to the Unique Superannuation Identifier (USI) 53 226 460 365 011; and
- complies with the death insurance cover requirements for choice of fund so that an employer can choose First State Super as its default fund.

The Trustee can be contacted on **1300 366 216** and written to at **GPO Box 89 Melbourne VIC 3001**. For more information, please visit [vicsuper.com.au](http://vicsuper.com.au)