



Unclaimed superannuation money statement - additional members

ATTACHMENT of

Supplier ABN

Provider TFN

Office use only **LU**

Lodgment date

Day Month Year

/ /

Section D: Member details

! If multiple members need to be reported for a specific reporting period, you must complete all sections of this statement for each member.

25 Member's TFN

! If reporting temporary resident unclaimed superannuation in response to a notification you received from us, the member's TFN you provide must match the TFN in the notification.

26 Temporary resident notification number

27 Name

Title: Mr Mrs Miss Ms Other

Family name

First given name

Other given names

28 Previous name (if applicable)

Family name

First given name

Other given names

29 Address

Suburb/town/locality

State/territory
(Australia only)

Postcode
(Australia only)

Country if other than Australia

30 Previous address (if applicable)

Suburb/town/locality

State/territory
(Australia only)

Postcode
(Australia only)

Country if other than Australia

31 Phone number (including area or country code)

32 Sex Male Female Unknown

33 Date of birth Day / Month / Year

34 Has the date of birth been deemed? No Yes

Section E: Member account details

35 Amendment indicator O – original A – amendment

36 Member status

U – unclaimed <input type="checkbox"/>	D – departing Australia superannuation payment (DASP) claim <input type="checkbox"/>	C – claim by member <input type="checkbox"/>
R – report and payment for a former temporary resident <input type="checkbox"/>	I – identity of member unknown <input type="checkbox"/>	G – no longer lost <input type="checkbox"/>
F – no balance due and payable for member <input type="checkbox"/>	B – benefit, active income stream <input type="checkbox"/>	Q – small lost member account <input type="checkbox"/>
A – already paid as unclaimed superannuation money <input type="checkbox"/>	E – reported in error <input type="checkbox"/>	P – insoluble lost member account <input type="checkbox"/>
N – no longer unclaimed <input type="checkbox"/>	T – transferred <input type="checkbox"/>	

! If the member status is T, you must complete section F.

37 Account details

Superannuation product name

Superannuation product identification number (SPIN)

Account number

Reference number

38 System code

39 Provider client identifier

40 Service period

Start date Day Month Year End date Day Month Year
 / / / /

Number of days

41 Last contribution date

Day Month Year
 / /

42 Date of last contact

Day Month Year
 / /

43 Previous provider name (if applicable)

44 Agent details (if applicable)

Name

Phone number (including area or country code)

Address

Suburb/town/locality

State/territory

(Australia only)

Postcode

(Australia only)

Country if other than Australia

45 Non-member spouse account

No Yes

46 Court order

No Yes Reference number

47 Death benefit

No Yes Date of death ^{Day} / ^{Month} / ^{Year}

48 Required payee

No Go to question 51.

Yes Go to question 49.

49 Required payee type

BN – binding nomination

TD – trust deed

OT – other

50 Payment requirement / binding nomination expiry

No Yes Expiry date ^{Day} / ^{Month} / ^{Year}

51 Member benefit – taxable component – taxed element

\$,,.

52 Member benefit – taxable component – untaxed element

\$,,.

53 Member benefit – tax-free component

\$,,.

54 Total member entitlement

\$,,.

Section F: Member transfer-out data record

ⓘ If you selected T at question 36, you must complete at least one member transfer-out data record.

55 Destination provider ABN

56 Destination account details

Superannuation product identification number (SPIN)

Destination account number

Destination provider client identifier

Destination system code

57 Transfer date ^{Day} / ^{Month} / ^{Year}

58 Transferred member benefit – taxable component – taxed element

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59 Transferred member benefit – taxable component – untaxed element

\$,,.

60 Transferred member benefit – tax-free component

\$,,.

61 Transferred total member entitlement

\$,,.

Section G: Employer details

EMPLOYER 1

62 Trading name

63 Business name

64 Address

Suburb/town/locality

State/territory

(Australia only)

Postcode

(Australia only)

Country if other than Australia

65 Contact details

Name

Phone number (including area or country code)

66 Employment start date

	Day			Month			Year				
	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

67 Employment end date

	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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68 Date of last contribution

	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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EMPLOYER 2

69 Trading name

70 Address

Suburb/town/locality

State/territory

(Australia only)

Postcode

(Australia only)

Country if other than Australia

71 Contact phone number (including area or country code)

72 Employment start date

	Day			Month			Year				
	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

73 Employment end date

	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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74 Date of last contribution

	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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