Additional Superannuation Contributions Form



Use this form to salary package additional superannuation contributions. For more information, please refer to our fact sheet and video at gosalary.com.au. You can apply by completing the form below, or an easier and faster way is:

R	Online at gosalary.com.au
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Member details			
Name	Employer		
Employee ID	Go Salary Member No.		
Superannuation contribution details			
Information required	Answer		
A. Superannuation fund details			
Date Additional superannuation contributions to commence	/		
Amount of superannuation per pay period	\$		
Superannuation Fund Name			
Member Number (employee)			
Tax File Number (TFN) - employee			
B. Private or self-managed fund			
Date Additional superannuation contributions to commence	/		
Amount of superannuation per pay period	\$		
Superannuation Fund Name			
ABN of Superannuation Fund			
TFN of Superannuation Fund			
BSB (must be 6 digits)			
Account No. (max. 9 digits)			
Reference (eg. your name)			
Attach Bank Statement for Super Fund (required)	Yes or No (tick one)		
Ready to go?			
Please adjust my salary package for additional superannuation contributions as per my instructions above.			
Member's signature	Date / /		