

Consolidating your super is easy



Enter your details, save and email or give this to Mercer Super. If us	ing a pen, complete with blue or black pen in capital letters
with one character per box. A	
Title: Mr O Mrs O Ms O Miss O Other U	
Family name	
First given name	Other given names
Current postal address	
Suburb/town/locality	
State/territory (Australia only) Postcode (Australia only)	
State refritery (Australia Grilly)	
Country if outside of Australia	
Country if outside of Australia	
Email address	
Phone number	Employee identification number (if applicable)

Before combining your super, you should consider the impact this decision may have on your existing insurance, contribution and tax arrangements. You may do this by contacting your existing super fund and/or obtaining financial advice.

Step 2: Consolidate your super	For Mercer Super use only	
If you have super elsewhere you may want to move it into your new Mercer Super account by providing your details below. Full transfer		
Amount Partial transfer \$		
Name of other superfund you are transferring from Unique Superannuation Identifier (USI) (if known) I do not currently wish to consolidate any other super accounts into my new Mercer Super Trust accounts	count.	
 I request that you may transfer the total value held in respect of me for the above super fund or policy to the Mercer Super Trust: I understand that on payment by my previous super fund, I discharge that super fund from any further liability in respect of the amount transferred. I request that any further contributions received by my previous super fund after my payment, be redirected to my membership with Mercer super Trust. I understand that information contained in this form will be handled by the trustee of the Mercer Super Trust to process my rollover. I understand that I will receive confirmation once my money has been received in the Mercer Super Trust. I understand that I have the right to ask my previous super fund for information that I reasonably require for the purposes of understanding any super entitlements I may have in that fund, including information about any fees and charges that may apply to the transfer and information about the effect of the transfer on any entitlements I have in my previous super fund. I confirm that I do not require such information from my previous fund. 		
Your privacy		
Mercer Superannuation (Australia) Limited collects, uses and discloses personal information about you in order superannuation benefits and give you information about your super. We may also use it to supply you with interproducts and services offered by us and our related companies. If you do not wish to receive marketing mater 1800 682 525. Our Privacy Policy is available to view at mercersuper.com.au or you can obtain a copy by continuous products.	formation about the other rial, please contact us on	
Employee Signature		
Please action my consolidation requests as per this form. I have read and understand the contents of this form. Signature Date	orm.	
Give this completed form to MERCER SUPER. Do not send this form to the Australian Taxation Office or your employer.		
mst@mercer.com OR Mercer Super GPO Box 4303, Melbourne VIC 3001		

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Consolidation form - Mercer Super

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