

# CHOOSE ELEVATE SUPER FOR YOUR EMPLOYER CONTRIBUTIONS

Please complete this form and hand it to your employer.  
Do not return this form to Elevate Super.

## 1. FOR YOU TO COMPLETE

Title	First name*	Middle name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last name*	Date of birth (DD/MM/YYYY)*	Gender*
<input type="text"/>	<input type="text"/>	<input type="text"/> M <input type="text"/> F
Elevate Super Member Number		
<input type="text"/>		
Member to sign here		
<input type="text"/>		
Date (DD/MM/YYYY)*		
<input type="text"/>		

## 2. FOR YOUR EMPLOYER

Your employee has nominated Elevate Super to receive their employer contributions. All contributions should be made through the SuperStream using the following details:

Product Name	Member Number	Unique Superannuation Identifier
Elevate Super	<input type="text"/>	40 586 548 205 006

### Important information

- The Fund can receive superannuation contributions under the Commonwealth Government's Choice of Fund Scheme.
- The Fund is a resident superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 ("SIS Act").
- The Fund is a complying superannuation fund within the meaning of the SIS Act and has not received a notice of non-compliance from the Australian Prudential Regulation Authority
- Contributions paid to the Fund will be maintained and subsequently paid only in accordance with the relevant law that applies to regulated & comp-lying superannuation funds.
- The Fund is not and has never been subject to a direction under section 63 of the SIS Act