

CHOICE OF SUPER FUND (nomination form)

PLEASE USE BLOCK LETTERS

This form is to be given to your employer only. Please do not send this form to QIEC Super. Use this form to ask your employer to pay your super into your QIEC Super account.

PERSONAL DETAILS

Mr/Mrs/Ms/Miss

SURNAME/FAMILY NAME

DATE OF BIRTH

 / /

GIVEN/FIRST NAMES

NUMBER

STREET

SUBURB/TOWN

STATE

POSTCODE

SUPER FUND DETAILS

FUND NAME

QIEC SUPER MEMBER NUMBER

FUND ABN

15 549 636 673

FUND SFN

FUND PHONE NUMBER

1300 360 507

DECLARATION

I wish to nominate QIEC Super as the eligible fund for my super contributions.

SIGNATURE OF EMPLOYEE

DATE

 / /

Once you have signed this form, please give it your employer. Do not send it to QIEC Super.

SOME IMPORTANT THINGS TO KEEP IN MIND

You do not have to choose a fund. If you don't make a choice, your employer's super contributions will be paid into a fund chosen by your employer. Your employer is not liable for the performance of the super fund you choose or the employer fund they choose on your behalf.

Do not seek financial advice from your employer unless they are licensed to provide it. You can choose a different fund later if you like.

Any money you have in existing funds will remain there unless you arrange to transfer it (or roll it over) to another fund. Check the impact of any exit fees, or benefits you may lose, before leaving the fund. Your employer cannot do this for you.

Your employer is only required to accept one Standard choice form from you every 12 months.

Your employer does not have to accept your choice of fund if you have not provided the appropriate documents.

HAVE YOU COMPLETED ALL RELEVANT SECTIONS?

PLEASE SEE OVERLEAF FOR MORE INFORMATION

To Whom It May Concern Compliance of QIEC Super

SFN: 268 342 944

ABN: 15 549 636 673

I hereby confirm that under the Trust Deed governing QIEC Super, including any amendments to it:

- (a) The fund complies with requirements under the Superannuation Industry (Supervision) Act 1993 ("the Act"),
- (b) Rollover benefits can be accepted from other Funds and there is no minimum amount,
- (c) Preserved monies can be paid to a member in the following circumstances:
 - (i) Retirement on or after preservation age, in accordance with the Act, or
 - (ii) Death or total and permanent disablement, or
 - (iii) Other circumstances, as provided under the Act,
- (d) Transferred benefits are fully vested in the member, and
- (e) Members cannot borrow from the Fund.

QIEC Super may accept contributions from any employer on behalf of any employee. New employers must complete an application form and provide contact details which can be provided on the form contained in the Employer Handbook, but are not required to complete a Participation Agreement. Signing a Participation Agreement binds the employer to the regulations of the Fund.

Making contributions to QIEC Super is simple with QIEC Super easy payment options.

You can pay your contributions:

- Using Employer Online
- By B-Pay
- By Cheque; or
- E.F.T. (by arrangement)

For further information on payment options offered by the Fund, please contact QIEC Super Administration on 1300 360 507.

Yours faithfully



QIEC Super Administration