

Retirement Scheme

Contribution Remittance Advice

Please complete in capital letters and in BLACK INK only

This form to be completed and attached to any cheque or paperwork sent to LGS. Payments **will not** be accepted if this form is not completed and attached.

1. Employer details

Employer name												
Reporting Centre code				Payroll Period ending (dd/mm/yyyy)		/		/				

2. Contribution details

Member contributions (post tax)	\$	
Defined pre tax Contributions	\$	
Award contributions	\$	
Employer contributions	\$	
Basic benefit contributions	\$	
Pre tax top up	\$	
Post tax top up	\$	
Total contributions	\$	
Additional Employer Contribution	\$	
Total Payment	\$	

3. Banking information

Account name	Local Govt Super Scheme Pool B
Bank	Commonwealth Bank of Australia
Branch	48 Martin Place, Sydney
BSB number	062-000
Bank reference number	10456980
Enter your reference code	

4. Process information

Please fax this form to (02) 9299 9321 immediately following the deposit of funds into this account

You **must** also provide a file (by e-mail) **at the time of the payment** containing member information in relation to this payment. The totals in the file must agree with this remittance advice. If you require details on the file specification you can contact the Employer Helpline on the number listed below.

5. Prepared by

Full name												
Contact phone no												
Signed				Date (dd/mm/yyyy)		/		/				

Where to send this form/enquiries

Local Government Super
PO Box N835
Grosvenor Place NSW 1220
website: www.lgsuper.com.au

Phone: 1800 636 441 (toll free)
8.30 am – 5.00 pm, Mon – Fri
Fax: (02) 9299 9321
enquiries: employeronline@lgsuper.com.au

