



**prosuper**

**Pension Commutation  
and Recommencement  
Order Form**

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**Client Details**

Firm Name:

Contact Name:

Address:

Phone:

Email:

**Fund Details**

Fund Name

**Trustee Details**

Corporate Trustee:

*(if applicable)*

A.C.N

*(If trustee is a company)*

Names of Directors/  
Individual Trustees

Street Address:

*(If trustee is a company use  
Registered Office address)*

## Member Details

Full Name

D.O.B.

Street Address

## Pension Details

Details of member's pension to be **commuted/canceled**:-

Pension Start Date:

Pension Commutation Date:

**Is this Pension a Transition to Retirement Pension?**

Yes

No

Details of the member's account balance to be used to fund the **new pension**:

New Pension Start Date:

EITHER :-                      % of account balance

OR :- \$                              from account balance

**Is this Pension a Transition to Retirement Pension?**

Yes

No

- A Member from age 55 can commence a pension before they retire, however, until they retire or reach 65 years of age (whichever comes first), the payments in a year (including payments made under a Splitting Order) must not be larger in total than their Account Balance x 10%

Account Balance to be used for the new pension:

Tax-Free Component: \$

Taxable Component: \$

**TOTAL: \$**

**Is there a Reversionary Beneficiary?**

Yes

No

- the pension may continue to be paid to a spouse, or a child of the beneficiary if the child:

- is less than 18 years of age; or
- is greater than 18 years of age, but less than 25 years of age and is financially dependent on the Member; or
- has a disability of the kind described in subsection 8(1) of the *Disability Services Act 1986*

Full Name

D.O.B.

### Payment details if paying by credit card

Please debit the following credit card by the amount of \$

CARD TYPE:            Visa            MasterCard

CARD NUMBER:

EXPIRY DATE :

NAME ON CARD :

SIGNATURE :