

Super Personal Contribution Form

Complete this form to make personal contributions to a LUCRF Super account.

Please print clearly using an in boxes where required.

Step 1 | Your details

Please read our Personal Information Collection Statement at lucrf.com.au/privacy.

LUCRF Super member number

(please call **1300 130 780** if you don't know your member number)

Title

 Mr Mrs Miss Ms Other (please specify)

Member's first name(s)

Member's last name

Date of birth

Gender

 Male Female Other

Residential/Street address

Unit/Street number

Street name

Suburb/City/Town

State

Postcode

Contact details

Email address

Home phone

Work phone

Mobile

If you're paying on behalf of a member, please provide your name below:

First name(s)

Last name

Your signature (if you're paying on behalf of a member)



Date



Step 4b | Payment method (continued)

3. Bank transfer

The LUCRF Super member number **must** appear on our bank statement, so it should form part of the transfer description. On the same day as the transfer, please email this completed form to mypartner@lucrf.com.au. This will ensure that funds received will be processed promptly to your account.

Our bank details: **Account Name:** LUCRF Pty. Ltd Trust Account **Bank:** Commonwealth Bank **Branch:** Chancery House
BSB: 063-003 **Account number:** 00251714

Payee's name:

Payment amount: \$ Date of payment: / /

Payment reference number:

4. Cheque or money order

Address your personal cheque, bank cheque or money order to 'LUCRF Super' and write your LUCRF Super member number on the back. Send it to us with this completed form. Please complete the details below:

Cheque Money order

Payment amount: \$ Date of cheque/money order: / /

Step 5 | Sign and date this form

I consent to the collection, use and disclosure of my personal information in accordance with the LUCRF Super Personal Information Collection Statement and the Privacy Policy available at lucrf.com.au/privacy or by calling **1300 130 780**.

Signature



Date

 / /

Checklist


Before you send this form to us, make sure you have:

- confirmed your eligibility at Step 2
- enclosed the payment if paying by cheque or money order
- completed all relevant steps
- signed and dated this form at Step 5.

Send this form to

LUCRF Super
PO Box 211
North Melbourne VIC 3051

Or scan and email it to: mypartner@lucrf.com.au

 If you need any help completing this form, please call us on **1300 130 780** or email mypartner@lucrf.com.au.

Office use only | Receipt details

Amount received: \$ Date received: / /

Payment type:

BPAY® Payroll EFT Cheque Money order

ID witnessed and copy received if paid in person (please cross): Yes

Driver licence Passport Other (please specify)

LUCRF Super Representative name

LUCRF Super Representative signature



Date

 / /