

* Hunter United Super Choice Fund

Employer contributions via Direct Debit



Hunter United
Since 1963

Instructions

Please use this form to authorise and request CUBS Superannuation Fund, ABN 90 120 177 925, user ID 425 209 to arrange through its own financial institution, a monthly debit to your nominated account to make regular employer contributions to a member's account.

This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

You should not complete this form unless you have received and understand the current Hunter United Super Choice Fund Product Disclosure Statement (PDS) and Contributions factsheet.

- Please print neatly in BLOCK LETTERS and use a BLACK pen.
- Print X in the appropriate boxes.
- Make sure you read all the instructions before you complete this declaration.

Please send us your completed form by ONE of the following methods:

Email: hunter@cupssuper.com.au

Post: Hunter United Super Choice Fund,
GPO Box 4559, Melbourne VIC 3001

Fax: 03 9640 0787

Please note: if you fax or email the form, there is no need to send us the original.

Step 1 – Member details

Account Number

Title

First Name

Last Name

Email address (Mandatory requirement)

Date of Birth

Phone number (mobile)

Step 2 – Direct Debit request

I authorise and request the following to be debited from the nominated account:

Amount to be deducted

\$

By completing this form you are overriding any previous direct debit authority you may have completed.

Direct debits will commence on the 15th of the following month based on the date this application is received and will occur monthly thereafter. Where the direct debit date falls on a non-business day, the debit will be processed the following business day.

Step 3 – Breakdown of contribution

Employer Contribution amount

\$

Salary Sacrifice Contribution amount

\$

Total Contributions:

\$

Note: Employer contributions include Superannuation Guarantee, and Award contributions and any voluntary contributions you make. Salary sacrifice contributions are also employer contributions but please show these separately. You should ensure that any contributions (mandated or otherwise) are able to be accepted by the Fund. Refer to the Contributions fact sheet for information.

Step 4 – Account details

Name of Bank, Credit Union, Building Society etc

Branch Address

Branch No (BSB)

Account Number

Account Name

Step 5 – Authority

- I hereby request and authorise the CUBS Superannuation Fund to debit my account as outlined above, until I advise otherwise in writing.
- I have read and agree to the terms and conditions of the attached Direct Debit Service Agreement.
- I declare that the information I have completed is true and correct.
- I declare I have obtained, read and understood the current Product Disclosure Statement (PDS) and fact sheets.

Signature

Date

Signature of additional account holder (if required)

Date

Direct Debit Service Agreement

Instructions

You should read this Service Agreement before completing a Direct Debit Authority. By completing the Direct Debit Authority you are authorising CUBS Superannuation Fund (ABN 90 120 177 925) to withdraw money from your nominated bank account, under the conditions set out below. You should keep a copy of this service agreement for your records.

Direct Debit arrangements

- The first direct debit will occur in the following month in which your application is processed.*
- Subsequent direct debits will occur on the 15th of each month.
- If this date falls on a non-business day, we will debit the amount on the next business day.
- We will give you 14 days notice (in writing) if these initial terms change.

* Direct debits will occur on the 15th of the following month. Where the direct debit date falls on a non-business day, the debit will be processed the following business day.

Your rights

You can change the direct debit amount, cancel an individual direct debit payment or suspend or cancel your direct debit arrangements by advising us in writing. You should allow at least two weeks notice for the change to take effect.

Email: hunter@cubssuper.com.au
Fax: 03 9640 0787

Post: Hunter United Super Choice Fund,
GPO Box 4559, Melbourne VIC 3001

Your responsibilities

It is your responsibility to make sure that:

- Your nominated bank account can accept and process direct debit requests;
- Your account details are correct, perhaps by checking them against a recent account statement from your financial institution;
- There is sufficient money (cleared funds) in your account on each due date;
- You tell us if your nominated account is transferred, closed or altered (such as the signatories change); and
- You notify Hunter United Super Choice Fund in writing if you wish to cancel the direct debit request.

If, for any reason, we cannot withdraw the necessary amount, or the withdrawal is dishonored by your financial institution, we will write to you to let you know your contribution was not made.

Enquiries and disputes

If you believe that there has been an error in debiting your account, you should notify us directly on 03 9691 2944 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly. If we conclude as a result of our investigations that your account has been incorrectly debited, we will respond to your query by arranging for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.

If we conclude as a result of our investigations that your account has not been incorrectly debited, we will respond to your query by providing you with reasons and any evidence for this finding. Any queries you may have about an error made in debiting your account should be directed to us in the first instance, so that we can attempt to resolve the matter between you and us. If we cannot resolve the matter, you can still refer it to your financial institution.

Read

By signing the Direct Debit Authority form you agree to be bound by the terms and conditions of the Direct Debit Service Agreement above. If you wish to cancel this direct debit authority, you must do so in writing.