

Benefit Payment Form



Before we can process your benefit payment request, we require the following to be returned to us:

- > This form completed, including **Section 8 – Declaration** to be signed. Please refer to the letter sent with this form for further instructions on which sections you are required to complete, based on the reason for your benefit payment.
- > Certified copies of your identity documentation (only if you do not choose the DVS verification of identity option described in the letter sent with this form.)

Please complete this form in **CAPITAL LETTERS** using a blue or black pen.

Section 1 | Your personal details

Title	Member number	Account number (if known)	Date of birth (DD/MM/YYYY)	
Surname				
Given name(s)				
Residential address				
Town/Suburb/City			State	Postcode
Postal address ☐ (Tick box if same as above)				
Town/Suburb/City			State	Postcode
Telephone (home)	Telephone (work)	Mobile number		
Email				

Section 2 | Provide proof of your identification

We'll need your identification details to help us make sure we're releasing your benefit to you.



If you cannot provide this documentation, call **1300 360 988**. We may be able to use other documents like Aboriginal and Torres Strait Islander organisation membership cards or referee statements if standard IDs aren't available due to structural barriers or difficult circumstances.

Tick the option to indicate which option you'd prefer:

Option 1: I choose electronic verification and have submitted ID details from TWO documents below

- ☐ I authorise Super Benefits Administration Pty Ltd to disclose my name, address, date of birth and the details of my government-issued IDs (e.g. passport, driver licence, Medicare) to the Australian Government's Document Verification Service (DVS) via GBG (an identity verification service provider) and credit reporting agency Experian, for the sole purpose of verifying my identity.
- Experian and DVS will only confirm whether the details match their records. Please note, no information beyond a Yes/No response is returned and no credit file information will be disclosed to First Super.
- For additional information about the DVS, refer to the DVS Privacy Statement:
idmatch.gov.au/resources/identity-verification-services-privacy-statement

Section 2 | Provide proof of your identification (continued)

Fill out any TWO of the following:

1. Medicare Card

Full name as it appears on Medicare card

Medicare card number

Individual reference number

Valid to date (MM/YYYY)

Medicare card colour (green/yellow/blue)

2. Driver Licence

Full name as it appears on licence

Driver licence number

State of issue

Date of expiry (DD/MM/YYYY)

Driver licence card number

3. Current Australian Passport

Full name as it appears on passport

Passport number

Country of issue

Date of expiry (DD/MM/YYYY)

Option 2: I choose to attach certified paper copies of my documentation

- ☐ I have attached certified photocopies of my driver licence, passport or government-issued proof of age card.
- ☐ Optional but recommended: I also consent to using electronic verification if my paper documentation has been incorrectly certified or can't be read, and I've provided my identification details for TWO of the documents listed above.



Each page of your photocopied documents must have been certified within the last 6 months. For instructions on how to get your document correctly certified and who can do this, please go to www.firstsuper.com.au/doc/proof-of-identity/.

Section 3 | Retirement benefit

Please complete the section below which applies to you and tick the relevant box(es):

- ☐ Total amount
- ☐ Partial amount \$

Please tick one box that applies to you:

- ☐ I have reached my preservation age and have permanently retired
Date ceased work (DD/MM/YYYY)
- ☐ I have ceased employment with my employer on or after reaching age 60.
Date ceased work (DD/MM/YYYY)
- ☐ I am over age 65 (I may still be working.)

Section 4 | Unrestricted non-preserved benefit

Unrestricted non-preserved benefits are benefits that have previously satisfied a condition of release and are payable at any time. Please refer to Preservation amounts in Section C.

- ☐ Total amount
- ☐ Partial amount \$

NB: To claim the Restricted Non-Preserved portion (if applicable), you must provide us with a separation certificate from the employer it was contributed through.

Section 5 | Small benefit claim

If you have left your employer and your total preserved benefit is less than \$200 on the date of your claim, you may cash this benefit. Your account balance may change due to investment returns, fees and taxes. If your preserved benefit exceeds \$200 at the date of your claim, we will be unable to pay it.

- ☐ Total amount

Section 6 | Rollover benefit

You can rollover your account balance into another superannuation fund. If you rollover all of your account balance, your account will be closed, any insurance cover you have will cease and no further contributions will be accepted by us on your behalf.

- ☐ Total amount
- ☐ Partial amount \$
(you must keep at least \$5,000 in your account for a partial rollover)

Rollover Fund details

Name of Rollover Fund

ABN

USI (if applicable)

Member number in rollover fund

Postal address of rollover fund

Suburb/Town/City

State

Postcode

If the rollover fund is a self-managed superannuation fund (SMSF), please also complete the section below and provide a copy of your fund's bank statement showing the fund name, BSB and account number.

Electronic Service Address (ESA)

SMSF bank account details

Name of financial institution

Name of account

BSB

Account Number

Section 7 | Cash payment (cannot be made to a third party)

Your bank account details:

Please note that if you provide incorrect details of your bank account and First Super acts on your instructions to make payment to your nominated bank account and this leads to a loss, First Super will not be liable for the loss of those funds. Therefore, **please check that the bank account details** provided are correct before returning this Form to First Super.

Name of financial institution

Name of account

BSB

Account Number

Section 8 | Declaration

- > I understand that my account will close and any insurance cover I may have will cease if my total benefit is paid out.
- > I understand that I must verify my identity with First Super to release my benefits.
- > I understand that if I have not provided my TFN, tax may be deducted at the highest marginal tax rate (plus Medicare Levy – currently 47%). If I do not provide my TFN, there may also be an additional tax of 30% on all concessional contributions.
- > I understand that I cannot claim a deduction for any personal (non-concessional) contributions or split my contributions with my spouse if my total benefit has been paid out by First Super.
- > Where I have requested a rollover, I authorise First Super to make arrangements with the fund nominated in Section H to have my benefits rolled out of First Super and acknowledge that this notice is irrevocable.
- > If I have requested a rollover to a self managed superannuation fund (SMSF), I confirm that I am a member, trustee or director of a corporate trustee of the fund.
- > I understand that in certain cases, First Super may be required by law to deduct tax from the taxable component (if any) of the superannuation payment.
- > I understand that First Super may request in writing additional information prior to releasing my benefit.
- > I understand that this form must be signed and dated.
- > I understand that I am responsible for any lost funds as a result of providing incorrect bank account details to First Super.
- > I authorize my superannuation payment to be paid as instructed on this form.
- > I confirm that I am authorised to provide the personal details presented and I consent to my information being checked with the document issuer or official record holder via third party systems for the purpose of confirming my identity.
- > I consent to the use of my personal information as outlined in First Super's Privacy policy available at www.firstsuper.com.au/privacy-policy/ or by calling us on **1300 360 988**.

Name (CAPITAL LETTERS)

Contact phone number:

Please sign here

Date (DD/MM/YYYY)

Please return this completed form by:

 First Super, PO Box 666, Carlton South, VIC 3053

 mail@firstsuper.com.au

Please retain all original documents for future use in case it is required by First Super.

Want to know more? We're here to help.

 1300 360 988

 mail@firstsuper.com.au

 Download the First Super app to manage your account

 firstsuper.com.au



Completing Proof of Identity

You may need to prove your identity before we can provide a service to you. You can choose one of two ways to do this:

1. Allow us to search the Document Verification Service (DVS) website, operated by the Federal Government. The DVS is a secure online system that allows organisations like First Super to compare a person's recorded identity details with the details shown on government documents previously issued to them, eg. Medicare card, driver licence or passport. You can provide your permission for us to search the DVS website in the First Super form you are completing or by calling us on **1300 360 988**.

OR

2. Send us certified copies of identification documents that confirm your identity.

i If you choose the second option, please read the information in the blue box below.



NOTE: This I.D. is only valid for two years from the date of certification.

This document explains the steps to follow to show proof of your identity and the types of documents you will need to provide to us.

- **Step 1:** What identification documents does First Super need?
- **Step 2:** How do you get your identification documents certified?
- **Step 3:** What do you do if you've changed your name?
- **Step 4:** What if you're acting on behalf of another person?
- **People authorised to certify documents** (Australia & Overseas)

Need help? If you can't provide copies of certified identification documents, contact our Member Services Team on **1300 360 988**.

Step 1: What identification documents does First Super need?

Tick the boxes relevant to what you are providing.

You can prove your identity to First Super by providing either of the following:

- ☐ One certified document from **List A**; OR ☐ One certified document from **List B**; **PLUS**
☐ One certified document from **List C**

List A

You can provide a certified copy of any one (1) of the following documents:

- ☐ A current Australian driver's licence with a photograph
- ☐ A current Australian state/territory proof of age card carrying a photograph
- ☐ An Australian passport (even if expired for less than 2 years)
- ☐ A current foreign passport – issued by a foreign government, the United Nations (UN) or a UN agency, containing a photograph and either your signature or a unique identifier.*

List B

You can provide a certified copy of one (1) of the following:

- ☐ A birth certificate or birth extract issued by an Australian State or Territory
- ☐ A birth certificate issued by a foreign government, the UN or a UN agency.*
- ☐ A citizenship certificate issued by the Australian Government
- ☐ A citizenship certificate issued by a foreign government. If not in English, a translation certificate must be prepared by a National Accreditation Authority for Translators and Interpreters Ltd (NAATI) accredited translator.
- ☐ A pensioner concession card, health care card or a seniors health care card issued by Centrelink that entitles the person to financial benefits.

+ **PLUS one (1) document** from **List C** that contains your name and current residential address.

List C

- ☐ A letter from Centrelink regarding a Government assistance payment (issued within the last 12 months)
- ☐ Australian Taxation Office Notice of Assessment (issued within the last 12 months)
- ☐ A notice issued by the Australian Government or a state or territory government (issued within the last 12 months)
- ☐ A notice issued by a local council or utility provider (issued within the last 3 months)

If you can't provide physical or electronic copies of your certified identification documents, please contact us on 1300 360 988.

*If not in English, a translation certificate must be prepared by a National Accreditation Authority for Translators and Interpreters Ltd (NAATI) accredited translator.

Step 2: How do I get my identification documents certified?

When you get your identity documents certified you will need to have both the original document and a copy of the document.

To certify your documents, the person will need to see the original document and then check that the copy is an exact copy of the original document.

Once the person has checked your documents, they will then certify the copy. To do this, the person will:

- write or stamp 'certified to be a true copy of the original seen by me'
- sign the document
- write their name and occupation
- write their address (either personal or professional)
- write their registration number (if applicable to their certifying authority, e.g. Australian Legal Practitioner, ID: 123456)
- write the date
- apply a stamp (if applicable).

Here's an example:

Certified to be a true copy of the original seen by me.

John Smith

Name: John Smith
Address: 123 Example St, Suburb VIC 3000
Qualification: Australian Legal Practitioner
ID: 123456
Date: 1 September 2023

Step 3: What do you do if you've changed your name?

Sometimes, you may have different names on your identification documents because you changed your name.

If this happens, you will need to provide a certified document that shows you have changed your name along with your documents from List A or B and C.

This can be any one (1) of the following documents from the Births, Deaths and Marriages authority of an Australian state or territory body.

- ☐ Marriage certificate ☐ Change of name certificate ☐ Deed poll

Step 4: What if you're acting on behalf of another person?

Sometimes you may be acting on behalf of one of our members. Before we can act on your instructions, we will need to check that we can accept instructions from you.

We will also need to confirm your identity with certified identification documents using the method outlined in Step 1.

To make sure First Super knows that you are authorised to act on behalf of a member, you will need to provide us with a certified copy of one (1) of the following documents:

- ☐ Guardianship papers
☐ Power of Attorney

Please note that each page of the Power of Attorney document must be certified. We will not be able to rely on a Power of Attorney document that is not correctly certified.

Who can certify my identity documents? (Australia & Overseas)

Below is a list of people from different occupations who are authorised to certify copies of original documents. If you are unable to find anyone on this list to help you, contact our Member Services Team for a full list of occupations who may assist you.

In Australia

- An Accountant
- Australia Post employee in charge of an office supplying postal services.
- Bank officer (with 5 or more years of continuous service)
- Chiropractor
- Dentist
- Financial advisor or financial planner
- Justice of the Peace (JP)
- Lawyer (legal practitioner enrolled on the roll of a State or Territory Supreme Court or the High Court of Australia)
- Magistrate
- Medical practitioner
- Nurse
- Officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more years of continuous service with one or more licensees (this may include certification by a Member and Employer Services Coordinator employed by First Super Pty Ltd).
- Optometrist
- Pharmacist
- Police officer
- Psychologist
- School principal
- Teacher (employed on a permanent full-time or part-time basis at a school or tertiary education institution)

Overseas

- Australian consular officer or diplomatic officer
- Judge
- Notary public
- Court registrar
- Justice of the Peace

Please note that besides a foreign notary public, the person certifying your documents overseas must quote their registration number or the relevant law that gives them authority to certify your documents.

How to send us certified copies of documents:

Mail your document to:

 **First Super, PO Box 666, Carlton South, VIC 3053**

Email us your document to:

 Email a copy to **mail@firstsuper.com.au**

Please retain all original documents for future use in case it is required by the Trustee.

We're here to help

Call our Member Services Team weekdays 8am – 6pm (Melbourne time) for general advice or speak to your local Member Services Coordinator.

 **1300 360 988**

 **mail@firstsuper.com.au**

 **firstsuper.com.au**



Issued by First Super Pty Ltd (ABN 42 053 498 472, AFSL 223988), as Trustee of First Super (ABN 56 286 625 181). October 2025. This fact sheet contains general advice which has been prepared without taking into account your objectives, financial situation or needs. You should consider whether the advice is appropriate for you or read the Product Disclosure Statement (PDS) before making any investment decisions. To obtain a copy of the PDS or Target Market Determination, please contact First Super on **1300 360 988** or visit our website at **firstsuper.com.au/pds**.

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