



DEDUCTION AUTHORITY

NAME:

I request you to make my Superannuation Guarantee contributions to the following Superannuation Fund:

NAME OF FUND:

Membership Number:

(A letter confirming that your superannuation is in a complying fund (other than HESTA and TASPLAN members) and can accept a contribution; along with payment method is required.)

I request that NOSS deduct additional fortnightly amounts as follows:

<input type="checkbox"/> Additional after tax superannuation payment - to be deposited in the above fund	\$
<input type="checkbox"/> Additional tax - to be paid to the tax office on my behalf	\$
<input type="checkbox"/> Christmas Club - to be paid to me on the last pay day before Christmas (only available if you have permanent hours)	\$
<input type="checkbox"/> Other	\$
.....	
.....	

NOTE: For Salary Package and Salary Sacrifice payments, please complete Salary Packaging Authority - EMP26-0509

Signed	Date