

ISSUED 24 MAY 2025
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Complete this form if you wish to make a contribution to the account of a Verve Super member, and you are not the member's spouse.

This form and accompanying documents can be posted to **Verve Super, GPO Box 2753, Brisbane QLD 4001** or scanned and emailed to hello@vervesuper.com.au. If you have any questions or need assistance in completing this form, please contact us on **1300 799 482** or hello@vervesuper.com.au.

IMPORTANT –

- (a) If you wish to contribute to your spouse's Verve Super account, please do not use this form. Please use the Spouse Contribution Form available from www.vervesuper.com.au.
- (b) You can contribute to a Verve Super member's account provided we have the member's Tax File Number (TFN) on file. If the member has not provided us with their TFN, this contribution cannot be accepted and will be returned to you.
- (c) The Government restricts the amount that can be contributed to a super account in a financial year. If your contribution causes the member to go over the limit (also known as a 'contribution cap'), additional tax may be payable by the member. For more information on contribution caps, please read the Verve Super **Product Disclosure Statement** and **How Verve Super Works Guide** before completing this form. You can obtain a copy from www.vervesuper.com.au or on request by phoning **1300 799 482**.

Section 1: Personal Details – Verve Super Member

GIVEN NAME(S)

SURNAME

MEMBER NUMBER

DATE OF BIRTH (DD/MM/YYYY)[^] / /

MOBILE PHONE NUMBER

EMAIL ADDRESS*

RESIDENTIAL ADDRESS

SUBURB

STATE

POSTCODE

[^] In accordance with superannuation legislation, you must be no older than 28 calendar days past the date of your 75th birthday in order to receive a personal contribution to your superannuation account. If you fail to meet this criterion on the date a contribution is received on your behalf, it will be returned to the contributor.

* By providing the member's email address, the member consents and authorises us to send communications, including information required by law, in electronic format (email or similar technologies) whenever possible. The member can elect to receive communications by post at any time by contacting Verve Super on **1300 799 482** or by email at hello@vervesuper.com.au.

Section 2: Personal Details – The Contributor

GIVEN NAME(S)

SURNAME

DATE OF BIRTH (DD/MM/YYYY)

 / /

MOBILE PHONE NUMBER

EMAIL ADDRESS*

RESIDENTIAL ADDRESS

SUBURB

STATE

POSTCODE

* By providing your email address, you consent and authorise us to send you communications, including information required by law, in electronic format (email or similar technologies) whenever possible. You can elect to receive communications by post at any time by contacting Verve Super on 1300 799 482 or by email at hello@vervesuper.com.au.

Section 3: Contribution Details

I WISH TO CONTRIBUTE AN AMOUNT OF: ^

Which represents a contribution on behalf of the person named in Section 1, who is a member of Verve Super.

^ You will need to complete this form each time you wish to make a contribution.

To make your contribution, please use the BPAY details associated with the account you're paying into. These details can be accessed by the Verve Super member from their member online account.

Please enter the BPAY reference number as the reference identifier.

Section 4: Declarations and Signature

By completing this form, I declare that:

- All the details that I have provided are true and correct.
- I have made an informed decision because I have read and understood the information relating to contributions contained in the **How Verve Super Works Guide**.
- I understand that this contribution will remain preserved in the recipient's account until a condition of release occurs, such as the recipient retiring after reaching preservation age or reaching age 65.
- I understand that this contribution will count towards the recipient's non-concessional (after-tax) contributions cap, and that contributions in excess of this cap will be taxed to the recipient at a higher rate.
- I have read the Privacy Statement (below) and consent to Verve Super using my personal information for the purposes as stated.

SIGNATURE OF CONTRIBUTOR*

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* This form accepts an electronic signature or an original 'wet' signature.

PRINT NAME

DATE

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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PRIVACY STATEMENT: By signing this form you consent to Verve Super collecting and using your personal information in order to establish and administer your super account, improve our products and services, keep you informed, and comply with the relevant legislation. Your personal information is generally collected from you but sometimes it may be collected from third parties like your employer or another Australian super fund with whom you have an account. Your personal information may be disclosed to other parties, including the Trustee, the Fund Promoter, the Fund's Administrator, the Fund's Insurer and professional advisers, government bodies and the trustee of any other fund to which you transfer, in order to administer your account. For more information about how your personal information is handled, please view our Privacy Policy at www.vervesuper.com.au, phone 1300 799 482 or email us at hello@vervesuper.com.au. The Trustee's privacy statement can be found at www.eqt.com.au/global/privacystatement.