



ACCESS-HDS  
07/13

## Application for Early Release of MilitarySuper Preserved and/or Ancillary Benefits on the grounds of Severe Financial Hardship

### Before you use this form

Before completing this benefit application form, it is recommended that you read the **MilitarySuper Product Disclosure Statement** (PDS) which is available from the MilitarySuper website [militarysuper.gov.au](http://militarysuper.gov.au) or by phoning **1300 006 727**.

Additional information is also available on the Publications section of the MilitarySuper website.

### Who should use this form

- Use this application if you have a preserved benefit or an ancillary benefit in the Military Superannuation and Benefits Scheme (MilitarySuper) and you wish to apply for an early release of those benefits on the grounds of **severe financial hardship**

#### OR

- You wish to advise payment arrangements for early release of preserved or ancillary benefits in MilitarySuper on **specified grounds** (see page 4) granted under a determination made by the Department of Human Services (DHS). This is explained further on page 4 under the heading 'DHS Releases'.

### Who is eligible for early release of benefits?

- a) You are eligible to apply for an early release of your MilitarySuper preserved benefit or ancillary benefit if at the time of your application:
- you have been in receipt of Commonwealth income support payments for a continuous period of 26 weeks (if you have reached your preservation age, you can access both a member and an employer component of a preserved benefit and an ancillary benefit at any time); and
  - you are unable to meet reasonable and immediate family living expenses.

**Note:** If you are in receipt of Commonwealth income support payments, including Commonwealth Development Employment Projects (CDEP) Scheme payments, from Centrelink you need to complete the "Authority to Request Information from Centrelink" (See **Attachment A**).

If you are in receipt of Commonwealth income support payment from the Department of Veterans' Affairs (DVA) you must provide a letter from DVA titled 'Release of Superannuation Benefits on Hardship Grounds - Income Support Requirement met'.

- b) Only DHS can agree to release of monies on **specified grounds**.

All enquiries regarding applications for early release on these grounds should be directed to DHS on **1300 131 060**. An application form is also available from the DHS website at [humanservices.gov.au](http://humanservices.gov.au)

If DHS has already approved the release of your MilitarySuper preserved or ancillary benefit on **specified grounds**, you only need to complete **Parts A, C, D, E and F** and also provide certified copies of the required number of identifying documents listed in **Part G** of this application. You will need to supply an original copy of the DHS approval letter with your application.

*You do not need to return this page with your form.*

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## Completing this form

Complete:

- **Part A:** About yourself
- **Part B:** Statutory Declaration
- **Part C:** Claim on specific grounds
- **Part D:** Payment arrangements
- **Part E:** Acknowledgement
- **Part F:** Tax File Number
- **Part G:** Identification requirements
- **Part H:** Privacy

Then lodge with MilitarySuper at the address in **Part I**.

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## Important Information

The fact that you may be in receipt of Commonwealth income support payments does not automatically lead to the conclusion that you are suffering severe financial hardship. The onus of satisfying the Commonwealth Superannuation Corporation (CSC) (or in most cases, a delegate of CSC) that you meet the guidelines for early release on the grounds of severe financial hardship rests with you.

Therefore it is important that you furnish all the necessary information and documentation identified in this application to assist the delegate to make a decision. It can be expected the delegate will make a decision based on the information you provide when you lodge your application (that is, the delegate will not generally seek any further information from you).

If you have previously had an amount released on the grounds of severe financial hardship, it would assist the delegate if you would provide a report from a financial counselling service (Centrelink provides an independent, free and confidential service) to demonstrate that you are taking active steps to alleviate the hardship. A similar report might also assist the delegate in circumstances where your discretionary expenditure exceeds your income. In this regard, you should note that the delegate's role is not to release benefits simply to address a deficiency between income and expenditure.

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## Definitions

To be '**Unable to meet reasonable and immediate family living expenses**' means that there is a gap between your (or your family's) income and your (or your family's) expenses which are associated with everyday living and you have no assets which could be used or sold to cover the gap apart from the assets of the superannuation benefits.

An '**immediate**' living expense is one that is, at the time of the early release application, due and payable (that is, you have been notified of a debt and it has not been paid by the date it has been required to be paid).

'**Family**' is given a broad interpretation to reflect changing social values. Clearly covered would be spouses, de facto partners, parents living with a member, children and stepchildren. Also covered would be same-sex couples living in a bona fide domestic relationship and foster children.

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## Commonwealth Income Support

To qualify for early release of your preserved or ancillary benefits in **MilitarySuper**, you must have been on Commonwealth income support for a continuous period of 26 weeks.

Such support payments include:

- Income support supplements
- Service pensions
- Social Security benefits
- Social Security pensions

Family allowance, Austudy payments or youth allowance payments in relation to full-time study are not included.

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## Documentation required to support your application

You are required to provide current and valid documentary evidence in support of your application. **Attachment B** contains a list of documents that you are required to provide to support your claims.

**Note: The evidence you provide (other than credit card transaction history) must not be dated more than 21 days prior to the date you sign this application form.**

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## Attachments

You are required to complete and forward the following attachments with your application. If the attachments are not completed properly, your application for early release may not be considered.

Your application will only be assessed based on the information you provide. The delegate will not generally seek any additional information from you, so it is important that you provide all necessary details/information/documentation with this application.

### **Attachment A – Authority to Request Information from Centrelink**

You are required to complete this authority to enable us to confirm with Centrelink that you are in receipt of a Commonwealth income support payment. If you do not complete this form, your application may be rejected as the delegate will not be able to confirm that you are in receipt of a Commonwealth income support payment.

### **Attachment B – Documents required to support an application for early release of benefits on severe financial hardship grounds**

**Attachment B** sets out the types of documents you are required to provide as evidence to support your claim that you are suffering severe financial hardship. You may provide additional relevant documentation to support your claim should you so wish. Any documentation you do provide in support of your application (other than credit card transaction history) must not be dated more than 21 days prior to the date you sign this application form.

### **Attachment C – Statement of Fortnightly Household Income and Expenditure**

You are required to provide the information in this attachment. If you do not do so, the delegate cannot determine your application. The information you provide in this attachment should reflect your current situation. Please note that the items listed are a guide only. You may include other items as necessary.

### **Attachment D – Statement of household assets and liabilities**

The delegate takes into consideration the value of household assets and liabilities when deciding whether or not you are in severe financial hardship. **Attachment D** of this application requires you to provide an estimate of household assets (that is, the things the household owns) and liabilities (that is, what the household owes). Things considered to be assets are: cars, the amount in bank accounts, household goods, shares/bonds and other investments.

When estimating the value of assets please use the resale value rather than the replacement value. For example, if you are valuing a car, use the price that you could sell the car for, not the cost of buying a new, similar car.

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## Amounts that can be paid

Generally, the amount released is limited to so much as is necessary to alleviate your financial hardship. Only one payment, in the form of a lump sum, can be made in any 12 months period commencing on the date of the first payment. The minimum amount that can be released is \$1,000 before tax (or the value of your benefit if it is less than \$1,000) and the maximum amount that can be released in any twelve months is \$10,000 before tax.

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## MilitarySuper preserved benefit Members and MilitarySuper and DFRDB Members with ancillary benefits acknowledgement

MilitarySuper preserved benefit members and members with MilitarySuper ancillary benefits seeking an early release of all or part of their benefits need to understand that their overall benefit will be reduced when their benefits becomes payable under the MilitarySuper Rules if they are granted early access to their benefit. Members seeking early release are required to acknowledge this at **Part E**.

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## Tax File Number

In accordance with the *Taxation Laws Amendment (Tax File Numbers) Act 1988*, MilitarySuper is required to deduct tax at the highest Marginal Tax Rate plus Medicare levy from a payment if a person does not provide a Tax File Number (TFN).

If you have not been issued a TFN you should lodge an Australian Taxation Office Application/Enquiry form with the Australian Taxation Office (ATO). Forms are available at all Taxation Offices. You must provide proof of identity at the time you lodge the form.

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## Department of Human Services Releases

MilitarySuper preserved benefit members and MilitarySuper members with ancillary benefits may consider asking DHS to approve the release of their preserved or ancillary benefits on other **specified grounds**. Some examples of the types of expenses these members may be able to claim include:

- Medical expenses
- Renovations to your home necessitated by severe disability
- Mortgage payments – to prevent loss of your home

Only DHS can agree to the release of monies on the specified grounds listed above.

All enquiries regarding applications for early release on these grounds should be directed to DHS on **1300 131 060**.

Postal address is – Early Release of Superannuation Benefits  
PO Box 1001  
Tuggeranong DC  
ACT 2901

An application form is also available from the DHS website at [humanservices.gov.au](http://humanservices.gov.au)

If DHS has already approved the release of your MilitarySuper preserved or ancillary benefit, you only need to complete **Parts A, C, D, E and F** and also provide certified copies of the required number of identifying documents listed in **Part G** of this application. You will need to supply an original copy of the DHS approval letter with your application.

**Note:** Only DHS and not a delegate of CSC can decide to release monies for expenses claimable on **specified grounds**.

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## Privacy

CSC and its Administrator, ComSuper, are collecting the information on this form for the following reasons:

- to confirm your identity
- to assess your eligibility for payment/rollover of the benefit
- to record up to date details relating to your spouse (if applicable) for future benefit eligibility
- to pay your benefit or to roll it over
- to contact you.

CSC and ComSuper are committed to protecting any personal information we hold about you. Your information will not be used for any other purpose or disclosed to another party unless:

- you authorise us to do so
- the disclosure is authorised by law. This may include disclosing your personal information to other Government agencies that have specific legislative authority to collect this information (for example the Australian Taxation Office, Centrelink or the Department of Veterans' Affairs). We will not disclose your personal information to these agencies unless it is lawful to do so
- it is to an Independent Research Firm who may, on our behalf, invite you to participate in a survey about our service (they are required to protect this information from disclosure to another party). If you do not want your contact details passed to this firm, please put a cross in the box at **Question 17** of the benefit application form.

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## Product Disclosure Statement

Before completing this benefit application form, it is recommended that you read the **MilitarySuper Product Disclosure Statement** (PDS) which is available from the MilitarySuper website [militarysuper.gov.au](http://militarysuper.gov.au) or by phoning **1300 006 727**.

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## Member Checklist

A Member checklist has been attached at the end of this application to enable you to confirm that you have provided all the information required so that your application can be processed without delay.

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## Contact us

We must provide you with any information you need to understand your benefit entitlements.

If you have any further questions about your benefit entitlements or investment options you can contact us in the following ways:

**Visit**

56 Chandler Street  
Belconnen ACT 2617

**Phone**

**1300 006 727**  
for the cost of a local call

**Mail**

GPO Box 2252  
Canberra ACT 2601

**Fax**

(02) 6272 9617

**Internet**

[militarysuper.gov.au](http://militarysuper.gov.au)

**Email**

[members@enq.militarysuper.gov.au](mailto:members@enq.militarysuper.gov.au)

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## Application for Early Release of MilitarySuper Preserved and/or Ancillary Benefits on the grounds of Severe Financial Hardship

### PART A

#### About yourself

1. Service number/MilitarySuper Reference Number

2. Salutation  Mr  Mrs  Ms  Miss  Other

Surname

Given name(s)

3. Former surname (if applicable)

If you have changed your name, please provide documents that confirm both your previous and current name, such as, Marriage certificate, Birth certificate, or Deed Poll (name Change) certificate. Certified copies are acceptable.

4. Date of birth  /  /

5. Postal address

POSTAL ADDRESS

SUBURB  STATE  POST CODE

Residential address

RESIDENTIAL ADDRESS

SUBURB  STATE  POST CODE

6. Contact details

BUSINESS HOURS

AFTER HOURS

MOBILE NUMBER

Email address

@

**PART B**

**Statutory Declaration**

7. I,

FULL NAME  
[Grid for full name]

of

RESIDENTIAL ADDRESS  
[Grid for residential address]

SUBURB STATE POST CODE  
[Grid for suburb, state, and post code]

hereby apply for the early release of my preserved/ancillary benefit on the grounds of severe financial hardship and make the following declaration under the *Statutory Declarations Act 1959*:

- i) I have been in receipt of Commonwealth income support payments for at least 26 weeks.
- ii) I am unable to meet reasonable and immediate family living expenses.
- iii) The information I have provided in relation to this application, including the information in the attachments to this application and any documentary evidence attached to this application, is true and correct to the best of my knowledge and belief.

I propose to apply any amount released to meet the following overdue amounts:

Purpose of release monies	1.	\$
	[Grid]	[Grid]
	[Grid]	[Grid]
	[Grid]	[Grid]
	[Grid]	[Grid]
	[Grid]	[Grid]
	[Grid]	[Grid]
	[Grid]	[Grid]
	[Grid]	[Grid]

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

8. Signature of person making the declaration

SIGNATURE  
[Signature box]

9. Declared at,  
on

[Grid for location]  
D D / M M / Y Y Y Y  
[Grid for date]

10. Signature of person before whom the declaration is made.

Before me,

FULL NAME  
[Grid for full name]

Signature and date

SIGNATURE  
[Signature box]

Date signed  
D D / M M / Y Y Y Y  
[Grid for date]

Part B continued on next page



11. Full name, qualification and address of person before whom the declaration is made (in printed letters)

	FULL NAME																			
	[Grid for Full Name]																			
of	RESIDENTIAL ADDRESS																			
	[Grid for Residential Address]																			
Occupation	SUBURB										STATE					POST CODE				
	[Grid for Suburb]										[Grid for State]					[Grid for Post Code]				
[Grid for Occupation]																				

**Note 1** Please refer to pages 19 and 20 of this application form for details of persons before whom a Statutory Declaration can be made.

**Note 2** A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is imprisonment for a term of 4 years — see section 11 of the *Statutory Declarations Act 1959*.

**Note 3** Chapter 2 of the Criminal Code applies to all offences against the *Statutory Declarations Act 1959*—see section 5A of the *Statutory Declarations Act 1959*.

## PART C

### Claim on specified grounds

12. I,

FULL NAME																			
[Grid for Full Name]																			
RESIDENTIAL ADDRESS																			
[Grid for Residential Address]																			
SUBURB										STATE					POST CODE				
[Grid for Suburb]										[Grid for State]					[Grid for Post Code]				

of

hereby apply for part/all of my MilitarySuper preserved/ancillary benefit following approval by the Department of Human Services (DHS) for early release on specified grounds

I have enclosed the original written determination by DHS dated:

on

D	D	/	M	M	/	Y	Y	Y	Y
[ ]	[ ]	/	[ ]	[ ]	/	[ ]	[ ]	[ ]	[ ]

confirming that I have satisfied the condition of release of my MilitarySuper preserved/ancillary benefit on specified grounds. **Please note, faxed or photocopied DHS determinations are not acceptable. MilitarySuper must receive the original documentation from DHS.**

I request that the part of my benefit released on specified grounds by DHS be paid into the account shown in **Part D** of this application.

Your signature

SIGNATURE
[Grid for Signature]

Date signed

D	D	/	M	M	/	Y	Y	Y	Y
[ ]	[ ]	/	[ ]	[ ]	/	[ ]	[ ]	[ ]	[ ]

**PART D**

**Payment Arrangements**

13. Give details of the account you want your benefit paid into. The account must be in Australia.

Type of financial institution  Savings bank  Building Society  Trading bank  Credit union

Name of institution

Branch name

Branch (BSB) number  -

Account number

Account held in name(s) of (must include your name)

**PART E**

**Acknowledgement**

14. I,

acknowledge and accept that the early release of all or part of my MilitarySuper preserved benefit or my ancillary benefit in MilitarySuper means my overall benefit will be reduced when the benefit becomes payable under the MilitarySuper Rules.

Your signature

Date signed

**PART F**

**Tax File Number**

15. Under the Superannuation Industry (Supervision) Act 1993, we are authorised to collect your TFN, which will only be used for lawful purposes.

These purposes may change in the future as a result of legislative change. We may disclose your TFN to another superannuation provider when your benefits are being transferred, unless you request in writing that your TFN not be disclosed to any other superannuation provider.

It is not an offence not to quote your TFN. However, giving us your TFN will have the following advantages (which may not otherwise apply):

- we will be able to accept all types of contributions (subject to scheme rules);
- the tax on contributions to your superannuation account/s will not increase;
- other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits; and
- it will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

We are required to validate your TFN with the ATO's records to confirm the TFN provided is yours and correct. Your TFN will be validated before your benefit will be paid using the SuperTICK validation service. If you do not provide your TFN, the processing of your benefit payment may be delayed.

If you have already provided your TFN to us, you are under no obligation to provide it again in this application.

Your Tax File Number

Your Tax File Number remains confidential

**PART G**

**Identification requirements**

16. To protect against fraud, safeguard your benefit and comply with the Government’s Anti-Money Laundering and Counter Terrorism Financing Legislation, we need you to provide documentation to prove your identity. Please be aware that under some circumstances we may request further information from you. If you are unable to provide documentation of the type set out below you should speak to a Customer Information Representative on **1300 006 727**.

All documents provided to confirm your identity must be certified.

You will need to provide certified copies of

- one document from column A in the table below, OR
- one document from column B AND one document from column C

For example, you could provide a certified copy of your driver’s licence (from column A) OR a certified copy of your birth certificate AND a certified copy of your tax return with your current residential address.

A	B	C
Driver’s licence or permit issued by State or Territory or foreign government	Birth Certificate or Birth Extract, issued by an Australian or foreign Government (either in English or accompanied by English translation prepared by an accredited translator)	Copy of a rates bill with the same address and name as on the application
Passport (current or expired by less than two years)	Australian Citizenship certificate	Copy of an electricity or gas bill with the same address and name as on the application
An identification or proof of age card issued by a State or Territory, containing a photograph	Citizenship certificate issued by a foreign country (either in English or accompanied by an English translation prepared by an accredited translator)	Copy of a tax return letter from the ATO with the same address and name as on the application
A national identity card, containing a photograph, issued by a foreign government (either in English or accompanied by an English translation prepared by an accredited translator)	Pension or other social security/ DVA benefit card	A letter from Centrelink or DVA with the same address and name as on the application
	ADF Discharge papers	

All copies of documents provided to MilitarySuper must be certified as true and correct copies of the original by one of the persons listed in the section **Attachment Reference** at the end of this form.

The person certifying your documentation must confirm in writing that you are the valid holder of the ID that you are presenting and that any copies are true copies of the original.

**The certification must include the name, address, occupation, telephone number and registration number (if applicable) of the certifying authority. The certification must include the name, address, occupation, telephone number and registration number (if applicable) of the certifying authority.**

**If you are providing copies of bills or statements, you should black out any personal financial information or details of transactions in order to protect your privacy. Copies of identification provided will be stored electronically in a secure environment. The paper copies will be securely destroyed. All copies will only be used for the purpose of confirming your identity.**

List the documents you have attached to prove your identity:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

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## PART H

### Privacy

17. I, declare that:

- I declare that the information I have provided is true and correct to the best of my knowledge. I acknowledge that it may be a criminal offence to knowingly provide false or misleading information or documents.
- I have read the **MilitarySuper Product Disclosure Statement (PDS)** and I understand the options available for my benefit entitlement
- I have read and understood the information set out in Part F – I understand that supplying my Tax File Number (TFN) is optional and that if I have not provided my TFN, tax will be deducted at the highest marginal tax rate
- the Tax File Number I have provided is the same number advised to me by the Australian Taxation Office

I understand that if I have not provided all the required information, this application may be returned to me for completion and payment may be delayed.

Signature and date

SIGNATURE
-----------

Date signed

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

- I do not want my contact details passed to a commissioned independent research firm for the purpose of participating in research on the service provided by MilitarySuper.

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## PART I

### Lodgement

18. Send your completed application and attachments to:

**MilitarySuper**  
**GPO Box 2252**  
**Canberra ACT 2601**

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END FORM

## Attachment A

### Authority to Request information from Centrelink

19. Date of birth

D	D	/	M	M	/	Y	Y	Y	Y

Your Centrelink  
Reference Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

I authorise CSC and ComSuper, as administrator of MilitarySuper, to confirm with Centrelink that :

- my name, date of birth and Centrelink Reference Number (CRN) supplied above match Centrelink records, and
- I have received a qualifying income support payment for the period required to qualify for the early release of my MilitarySuper preserved/ancillary superannuation benefit on the grounds of severe financial hardship.

I understand that CSC and ComSuper will use the information collected on the basis of this authority only for the purpose of determining my eligibility to receive an early release of my MilitarySuper preserved/ancillary benefits on the grounds of severe financial hardship.

I understand that CSC and ComSuper will not use this information for another purpose, or disclose it to another party, unless I authorise them to do so or the disclosure is required by law.

Signature and date

SIGNATURE

Date signed

D	D	/	M	M	/	Y	Y	Y	Y

## Attachment B

### Purposes for which released amounts will be used

The purposes for which the released amounts will be used are:

1.															\$						
2.															\$						
3.															\$						
4.															\$						
5.															\$						
6.															\$						
7.															\$						
8.															\$						

You are required to provide current documentary evidence that the above debts are now overdue for payment. Note: Please send copies of documents, not originals, as they will be scanned onto your electronic file and then archived. You will also need to demonstrate that the debts are expenses associated with everyday living. You should also understand that the delegate reserves the right to contact any or all of the creditors/suppliers you have nominated to confirm the detail/information/documentation you have provided.

For example, if you are seeking a release to pay:

- **credit card debts**, you will need to provide the three consecutive previous monthly statements with the transaction history for each statement. The onus is on you to explain how the expenditure in those statements relates to reasonable and immediate expenses associated with everyday living
- **bank loans** (or loans from other financial institutions), you will need to provide documentary evidence of the loan, including a copy of the loan contract and demonstrate the loan was obtained to meet reasonable and immediate expenses associated with everyday living. You will also need to provide written evidence indicating the lending institution has commenced formal recovery action to recover the loan (even if this evidence is provided, the delegate may still not release any amount, particularly in circumstances where the delegate is of the view that bankruptcy proceedings are imminent)
- **personal loans** (that is, loans from an unlicensed creditor), a delegate would not consider

releasing an amount to pay a personal loan as these types of loans are not legally enforceable and as such, could not be considered to be a reasonable and immediate expense associated with everyday living

- **rent arrears**, you will need to provide a letter from your real estate agent/landlord stating the amount owed in arrears. You should also explain how you intend to meet future rent commitments
- **relocation costs**, you will need to provide an explanation for your relocation, a written quote from a real estate agent setting out the amount required for rent and bond, reasons, if any, that a current bond will not be refunded or reasons why a current bond cannot be applied against a new bond. You will also need to provide a written quote from a removalist if this is part of the costs claimed (the delegate would generally only consider releasing an amount to meet rent and bond and removalist costs in exceptional circumstances)
- **motor vehicle expenses**, you will need to provide an itemised quote for repairs required to make the vehicle roadworthy (or an invoice for repairs undertaken within the previous 21 days), a registration renewal notice or notice of insurance renewal (the delegate would generally only consider releasing amounts to meet repairs to make a vehicle roadworthy, for registration or insurance in circumstances where the vehicle is used for medical purposes for you or your dependants (written confirmation from a medical practitioner is required) and/or you have no access to public transport)
- **essential household items**, you would need to provide reasons for requiring the item, a signed statement from a qualified repairer indicating an item cannot be repaired at a reasonable cost and a reasonable quote from two suppliers, including a supplier of second hand goods, to support a claim (it would be highly unlikely a delegate would release an amount to enable a member to purchase assets, even if they are considered essential by a member)
- **medical/dental expenses**, you will need to provide invoices for emergency medical/dental treatment with an advice from the treating practitioner that the treatment was necessary at the time or a quote for medical/dental treatment that a doctor/dentist certifies is required immediately
- **utilities**, you will need to provide a copy of the overdue account (the delegate will only consider releasing an amount to pay an overdue amount for telephone (mobile telephone expenses only if there is no landline), electricity and gas, water rates and council rates)
- **education expenses**, you will need to provide written evidence of enrolment and a quote for the purchase of text books where release is being sought for this purpose, written advice from a school that uniforms are required to be worn, a price list and details of items required where release is being sought for this purpose (a delegate would only consider releasing an amount to pay private school fees or TAFE fees on one occasion only and only upon written evidence of enrolment and of the fact that fees are overdue; a delegate would not consider releasing any amount to pay public school fees)
- **legal expenses**, any expenses in connection with the defence of unlawful activities are not considered to be immediate expenses associated with everyday living; the delegate would not release amounts to pay these expenses. A delegate may consider releasing amounts to meet expenses associated with family law matters if you provided a copy of the Court Orders and a copy of the Property Settlement
- **finances**, these are not considered to be immediate expenses associated with everyday living; the delegate would not release amounts to pay fines for breaches of the law
- **Centrelink debts**, the delegate would not release amounts to pay these debts as these are not considered to be immediate expenses associated with everyday living. Centrelink generally arranges to recover any overpaid amount from subsequent payments
- **tax debts**, the delegate would not release amounts to pay these debts as these are not considered to be immediate expenses associated with everyday living. In any event, the tax laws provide for a member to apply to the Tax Commissioner for the release from payment of tax debts on the grounds of severe financial hardship
- **business related expenses**, it is highly unlikely the delegate would consider release to pay business expenses as these generally would not be considered to be expenses associated with everyday living.

#### **Bankrupt members and arrangements under the Bankruptcy Act (forms of insolvency administration)**

A delegate will not release any part of a MilitarySuper preserved benefit to meet those liabilities of a MilitarySuper member that led to the member becoming bankrupt or entering into Part IX or X arrangements under the Bankruptcy Act.

## Attachment C

## Statement of fortnightly household income and expenditure

The figures you provide should reflect your household's current situation. These items are a guide, you may include other items.

Household comprises of   Adults   Children

20. Housing	Rent	\$	<input type="text"/>	
	First mortgage	\$	<input type="text"/>	
	Second mortgage	\$	<input type="text"/>	
	Land rates	\$	<input type="text"/>	
	Water rates	\$	<input type="text"/>	
	Home & Contents Insurance	\$	<input type="text"/>	
	House repairs	\$	<input type="text"/>	
	House replacements	\$	<input type="text"/>	
	Strata plan levies	\$	<input type="text"/>	
		<b>Total (1):</b>	<b>\$</b>	<input type="text"/>
21. Utilities	Electricity	\$	<input type="text"/>	
	Gas	\$	<input type="text"/>	
	Heating (other than gas/electricity)	\$	<input type="text"/>	
	Telephone	\$	<input type="text"/>	
		<b>Total (2):</b>	<b>\$</b>	<input type="text"/>
22. Transport	Petrol	\$	<input type="text"/>	
	Repairs	\$	<input type="text"/>	
	Registration	\$	<input type="text"/>	
	Insurance	\$	<input type="text"/>	
	Licence	\$	<input type="text"/>	
	NRMA or similar	\$	<input type="text"/>	
	Fares (Bus, Train, Ferry)	\$	<input type="text"/>	
		<b>Total (3):</b>	<b>\$</b>	<input type="text"/>
	23. Other Repayments	Car	\$	<input type="text"/>
Bank Cards		\$	<input type="text"/>	
Credit Cards		\$	<input type="text"/>	
Store Accounts		\$	<input type="text"/>	
Finance Companies		\$	<input type="text"/>	
Loans		\$	<input type="text"/>	
		<b>Total (4):</b>	<b>\$</b>	<input type="text"/>

24.	Food	Groceries	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Meat	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Fruit & Vegetables	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Milk and Bread	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Lunches	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Pet Food	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<b>Total (5):</b>	<b>\$</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
25.	Medical	Health Insurance	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Doctor/Dentist	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Chemist/Vitamins	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Optometrist	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Other (Specify)	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<b>Total (6):</b>	<b>\$</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
26.	Education	School Fees	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Uniforms/School Bags	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Excursions/Sports	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Stationery/Books	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Child Care	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<b>Total (7):</b>	<b>\$</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
27.	Other	Maintenance	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Life Insurance	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Savings	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Clothing/Hair Cut	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Union Fees	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Entertainment	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Sport	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Holidays	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Gifts	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Alcohol	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Cigarettes	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Laundry	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Gambling (Lotto/Scratchies)	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Vet Fees	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Personal Spending	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<b>Total (8):</b>	<b>\$</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total</b>	<b>Total Expenditure (A):</b>	<b>\$</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	



**Household income  
(less tax)**

Salary	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Centrelink Benefits	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Compensation	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Board	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annuity	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maintenance	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total income:	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Attachment D**

**Statement of household assets and liabilities**

You are required to set out details of the household assets (that is, what the household owns) and household liabilities (that is, what the household owes).

**What the household owns**

House (main residence)	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Any other house/real estate/unit	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Motor Vehicle 1	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Motor Vehicle 2	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Motor Vehicle 3	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Caravan	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Motor bikes	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Furniture and household goods	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tools of trade	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank Accounts (list)	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Shares	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Life assurance/annuities	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other investments	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Debtors	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(that is, those who owe money to you or other members of the household – please list the names and amounts owed)									
Other (please list)	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total:</b>	\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>What the household owes</b>	1st Mortgage	\$	<input type="text"/>
	2nd Mortgage	\$	<input type="text"/>
	Loans (specify)	\$	<input type="text"/>
	Bank overdraft	\$	<input type="text"/>
	Credit cards (list)	\$	<input type="text"/>
		\$	<input type="text"/>
		\$	<input type="text"/>
		\$	<input type="text"/>
		\$	<input type="text"/>
		\$	<input type="text"/>
	Store cards (list)	\$	<input type="text"/>
		\$	<input type="text"/>
		\$	<input type="text"/>
		\$	<input type="text"/>
	Creditors	\$	<input type="text"/>
(that is, those to whom you or other members of the household owe money – please list the names and amounts owed)			
Other (please list)	\$	<input type="text"/>	
	\$	<input type="text"/>	
	\$	<input type="text"/>	
	\$	<input type="text"/>	
	\$	<input type="text"/>	
<b>Total:</b>	<b>\$</b>	<input type="text"/>	

## Attachment E

### Member Checklist

Have you:

- Read the explanatory notes
- Filled in all sections applicable to you
- Signed the Statutory Declaration in **Part B** (if applicable)
- Attached all the requested documentary evidence to support your application (if claiming on financial hardship grounds). **Note: Your application will be rejected if you do not provide all necessary information for the delegate to determine whether you are suffering severe financial hardship.**  
The delegate will not generally seek any additional information from you, so it is important that you provide all necessary details/information/documentation with this application.
- Had the Statutory Declaration at **Part B** witnessed by a qualified person (if applicable)
- Completed and signed the Authority to Request Information from Centrelink at **Attachment A**
- Set out the purposes for which released monies will be used at **Attachment B**
- Completed the statement of fortnightly household income and expenditure at **Attachment C**
- Completed the statement of assets and liabilities at **Attachment D**
- Provided your bank account details in **Part D**
- Signed the acknowledgment at **Part E**
- Provided your tax file number at **Part F** (you do not have to complete this part if you have previously provided your tax file number. If we do not have your tax file number, we are obliged to deduct tax from your payment at the highest marginal tax rate plus Medicare levy)
- Provided the properly certified documentation set out in **Part G** to confirm your identity
- If applicable, attached a copy of the DHS release letter
- Attached a copy of the letter from Department of Veterans' Affairs confirming receipt of Commonwealth income support

### Statutory Declaration

**PART B** of this application requires you to make a Statutory Declaration. A statutory declaration under the *Statutory Declarations Act 1959* may be made before:

1. a person who is currently licensed or registered under a law to practise in one of the following occupations:
  - Chiropractor
  - Nurse
  - Physiotherapist
  - Dentist
  - Optometrist
  - Psychologist
  - Legal practitioner
  - Patent attorney
  - Trademarks attorney
  - Medical practitioner
  - Pharmacist
  - Veterinary surgeon
2. a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described); or
3. a person who is in the following list:
  - Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
  - Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the *Consular Fees Act 1955*)
  - Bailiff
  - Bank officer with 5 or more continuous years of service
  - Building society officer with 5 or more years of continuous service
  - Chief executive officer of a Commonwealth court
  - Clerk of a court
  - Commissioner for Affidavits
  - Commissioner for Declarations
  - Credit union officer with 5 or more years of continuous service
  - Employee of the Australian Trade Commission who is:
    - a) in a country or place outside Australia; and
    - b) authorised under paragraph 3 (d) of the *Consular Fees Act 1955*; and
    - c) exercising his or her function in that place
  - Employee of the Commonwealth who is:
    - a) in a country or place outside Australia; and
    - b) authorised under paragraph 3 (c) of the *Consular Fees Act 1955*; and
    - c) exercising his or her function in that place
  - Fellow of the National Tax Accountants' Association
  - Finance company officer with 5 or more years of continuous service
  - Holder of a statutory office not specified in another item in this list
  - Judge of a court
  - Justice of the Peace
  - Magistrate
  - Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the *Marriage Act 1961*
  - Master of a court
  - Member of Chartered Secretaries Australia
  - Member of Engineers Australia, other than at the grade of student
  - Member of the Association of Taxation and Management Accountants
  - Member of the Australasian Institute of Mining and Metallurgy

Member of the Australian Defence Force who is:

- a) an officer; or
- b) a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with 5 or more years of continuous service; or
- c) a warrant officer within the meaning of that Act

Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants

Member of:

- a) the Parliament of the Commonwealth; or
- b) the Parliament of a State; or
- c) a Territory legislature; or
- d) a local government authority of a State or Territory

Minister of religion registered under Subdivision A of Division 1 of *Part IV of the Marriage Act 1961*

Notary public

Permanent employee of the Australian Postal Corporation with 5 or more years of continuous service who is employed in an office supplying postal services to the public

Permanent employee of:

- a) the Commonwealth or a Commonwealth authority; or
- b) a State or Territory or a State or Territory authority; or
- c) a local government authority;

with 5 or more years of continuous service who is not specified in another item in this list

Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made

Police officer

Registrar, or Deputy Registrar, of a court

Senior Executive Service employee of:

- a) the Commonwealth or a Commonwealth authority; or
- b) a State or Territory or a State or Territory authority

Sheriff

Sheriff's officer

Teacher employed on a full-time basis at a school or tertiary education institution

**Note 1:** A person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*. Section 11 of the *Statutory Declarations Act 1959* provides for a penalty of imprisonment for 4 years.

**Note 2:** Chapter 2 of the Criminal Code applies to all offences against the Statutory Declarations Act 1959 – see section 5A of the *Statutory Declarations Act 1959*.

## Attachment reference

## Persons before whom documents may be certified

1. A person who is currently licensed or registered under a law to practise in one of the following occupations:
  - Chiropractor
  - Dentist
  - Medical practitioner
  - Nurse
  - Optometrist
  - Patent attorney
  - Pharmacist
  - Physiotherapist
  - Trademarks attorney
  - Veterinary surgeon
  - Legal Practitioner.
  
2. A person who is enrolled on the roll of the Supreme Court of a State or Territory or the High court of Australia, as a legal practitioner (however described).
  
3. **A person who is in the following list**
  - Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
  - Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the *Consular Fees Act 1955*)
  - Authorised representative or officer of an Australian Financial Services licensee having 2 or more years of continuous service with one or more licensee
  - Bailiff
  - Bank officer with 2 or more continuous years of service
  - Building society officer with 2 or more years of continuous service
  - Chief executive officer of a Commonwealth court
  - Clerk of a court
  - Commissioner for Affidavits
  - Commissioner for Declarations
  - Credit union officer with 2 or more years of continuous service
  - Employee of the Australian Trade Commission who is:
    - (a) in a country or place outside Australia; and
    - (b) authorised under paragraph 3 (d) of the *Consular Fees Act 1955*; and
    - (c) exercising his or her function in that place
  - Employee of the Commonwealth who is:
    - (a) in a country or place outside Australia; and
    - (b) authorised under paragraph 3 (c) of the *Consular Fees Act 1955*; and
    - (c) exercising his or her function in that place
  - Fellow of the National Tax Accountants' Association
  - Finance company officer with 2 or more years of continuous service
  - Statutory Office holder not otherwise listed

## Attachment reference (continued)

- Judge of a court
- Justice of the Peace
- Magistrate
- Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the *Marriage Act 1961*
- Master of a court
- Member of Chartered Secretaries Australia
- Member of Engineers Australia, other than at the grade of student
- Member of the Association of Taxation and Management Accountants
- Member of the Australian Defence Force who is:
  - (a) an officer; or
  - (b) a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with 2 or more years of continuous service; or
  - (c) a warrant officer within the meaning of that Act
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- Member of:
  - (a) the Parliament of the Commonwealth; or
  - (b) the Parliament of a State; or
  - (c) a Territory legislature; or
  - (d) a local government authority of a State or Territory
- Minister or religion registered under Subdivision A of Division 1 of Part IV of the *Marriage Act 1961*
- Notary public
- Permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- Permanent employee of:
  - (a) the Commonwealth or a Commonwealth authority; or
  - (b) a State or Territory or a State or Territory authority; or
  - (c) a local government authority;with 2 or more years of continuous service who is not specified in another item in this Part
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Police officer
- Registrar, or Deputy Registrar, of a court
- Senior Executive Service employee of:
  - (a) the Commonwealth or a Commonwealth authority
  - (b) a State or Territory or a State or Territory authority
- Sheriff
- Sheriff's officer
- Teacher employed on a full-time basis at a school or tertiary education institution
- Member of the Australasian Institute of Mining and Metallurgy.


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members@  
enq.militarysuper.gov.au

 **PHONE**  
1300 006 727

 **FAX**  
(02) 6272 9617

 **POST**  
MilitarySuper  
GPO Box 2252  
Canberra ACT 2601

 **WEB**  
www.militarysuper.gov.au

 **OVERSEAS**  
+61 2 6272 9623