

→ Update of member record form

Use this form to tell LGsuper about a member's change of name, address or transfer to another local government employer.

Personal details LGsuper respects privacy. All personal information collected is protected in line with the National Privacy Principles and LGsuper's Privacy policy.

Member's last name

Member's given names

Member number

Name change (if applicable)

New last name

New given names

Transfer to new employer (if applicable)

The above member has transferred as follows:

Old employer to complete sections 1, 2 and 3. New employer to complete boxes 1, 3, 4, 5 and 6.

1. Old employer

2. Date left

3. New employer

4. Date started

5. Benefit class at new employer (circle)

Class 1

Class 3

Class 4

6. Salary sacrifice

yes no

Member's address change (if applicable) Please provide new address for member below.

New street address

Suburb

Postcode

Signature

I confirm the details above are correct and if providing a name change, I have sighted a certified copy of identification (e.g. Marriage Certificate, Decree Nisi) that will be made available to LGsuper on request.

Authorised signature for employer

Employer

Date