

Declarant Details

Name :

Firm :

Contact Number :

Email :

Role :

Accountant Financial Planner / Adviser

I confirm I act as the Accountant / Financial Planner for :

SMSF Name

Member's Name :

We have discussed the member's SMSF investment strategy and confirm they will be contributing an additional \$ per :

Week Fortnight Month

as part of this strategy.

Division 293 Tax Declaration

Is the member subject to Division 293 tax?

Yes No

If Yes, please complete the following:

The member is aware they may be subject to additional tax payable due to their level of contributions or exceeding income thresholds.

I confirm in my discussions with the member that the additional tax will be paid by:

The member's own money Releasing money from super

Member's Name Acknowledgement & Signature

I acknowledge the above declaration and confirm my understanding of the contribution strategy and any potential tax implications.

Signature

Date

 / /

Declarant (Accountant / Financial Planner / Financial Adviser) Acknowledgement & Signature

I confirm the above declaration and my role in advising the member regarding their proposed superannuation contributions.

Signature

Date

 / /