

B) Complete this part if you are not The DFRDB and/or Productivity Scheme Member

Full name: _____

Contact details: Home phone (____) _____

Work phone (____) _____

Mobile phone: _____

Member's Full name: _____

Member's Service number: _____

Member's Date of birth: _____
day month year

Date(s) calculation to be made 1: _____
day month year

2: _____
day month year

3: _____
day month year

4: _____
day month year

Note. A fee of \$150 is payable for each calculation date requested.

PART C
Payment methods

By cheque or money order - Please complete the following payment details

Number of calculation dates requested: _____

Amount enclosed: \$ _____ (\$150 per calculation date)

Note: A three-day clearance period applies to cheque payments. Your application will be processed after your cheque has been cleared.)

By credit card (Mastercard or Visa) - Please complete the following payment details

Number of calculation dates requested: _____

Amount payable: \$ _____ (\$150 per calculation date)

Type of card (tick one): Mastercard Visa

Credit card number: _____

Expiry date: _____ / _____

Name of cardholder (as shown on card): _____

Signature of cardholder: _____

PART D

Checklist

Make sure you follow these steps

1. Complete an Application for Superannuation Information
2. Complete a Declaration to Accompany Application for Superannuation Information (Form 6)
3. Enclose a cheque or money order made payable to ComSuper or credit card deduction authority
4. Send the Application, Declaration and payment to:

DFRDB
PO Box 22
BELCONNEN ACT 2616.

Note: If you are requesting information for you and your spouse, you will need to complete separate applications and declarations. A fee of \$150 applies to each calculation date requested.

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

The DFRDB and Productivity Schemes are administered by ComSuper

Located at:	Unit 4, Cameron Offices, Chandler St, Belconnen ACT 2617
Postal Address:	PO Box 22, Belconnen ACT 2616
Internet:	www.dfrdb.gov.au
Email:	members@enq.dfrdb.gov.au

Telephone:	1300 006 727
Fax:	(02) 6272 9617
TTY:	(02) 6272 9827

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Declaration to accompany application for superannuation information

This declaration is made under subsection 90MZB (2) of the Family Law Act 1975 to obtain information about a superannuation interest. **You must tick one box only in each category**

PART A

I (full name), _____

of (postal address), _____

_____ day month year

born on _____ make the following declaration in support of my application for superannuation information to the Defence Force Retirement and Death Benefits Authority (the Trustee) for information about:

my superannuation interest

or

a superannuation interest of

Given names: _____

Surname: _____

who is a Member of The DFRDB and/or Productivity Scheme.

PART B

I am:

 a Member of the The DFRDB and/or Productivity Scheme**or** the spouse of

Given names: _____

Surname: _____

who is a Member of The DFRDB and/or Productivity Scheme

or intending to enter into a superannuation agreement under Part VIII B of the *Family Law Act 1975* with:

Given names: _____

Surname: _____

who is a Member of The DFRDB and/or Productivity Scheme.

PART C**I require the information to:** assist me to properly negotiate a superannuation agreement assist me in connection with the operation of Part VIII B of the Family Law Act 1975

Signed _____ Dated: _____

Important Note: Section 90M ZG of the Family Law Act 1975 provides that false declarations served on a Trustee may be subject to a penalty of 12 months imprisonment.