# Contribution Work Test Declaration

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| To the Trustee: |  | | | |  | |  | |
| Fund Name | | |  |  | | Financial Year | | | |
| Member Declaration | | |  |  | |  | |  | |
|  | | |  |  | | | | | |
| Member Name | |  |  | Date of Birth | | | | | |
|  | |  |  |  | |  | |  | |
|  | | |  |  | |  | |  | |
| Member Address | | |  | State | |  | | Postcode | |
|  | |  |  |  | |  | |  | |
|  | | |  |  | |  | |  | |
| Phone | |  |  |  | |  | |  | |

Eligibility to Contribute

I declare that:

I was aged 67 to 74 and I have worked at least 40 hours in a period of 30 consecutive days or less in the financial year in which the contributions was made/applies.

I was aged 75 or older and all contributions to my superannuation fund in the financial year in which this contribution was made/applies are either superannuation guarantee, employer certified agreement or award contributions.

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|  |  |  |
| Member Signature |  | Date |