

# Fire and Emergency Services Superannuation Board

## CASH PART OF RETAINED BENEFIT

**TRANSFER**

**DATE:**

**OR** *(please tick)*

**NAME:**

**CHEQUE**

**MEMBER No:**

I wish to withdraw \$ \_\_\_\_\_ from my Retained Benefit account.

*(Amount in words)* \_\_\_\_\_

Please process this payment on \_\_\_\_\_ (date) as per the following instructions.

**Account No:**

**BSB No:**

**Bank:**

**Account Name:**

**Member Signature:**

**Member's Address:**

### OFFICE USE

*Authorised:*

*Verified Signature:*