

SR04

Superannuation Surcharge
Assessment Variation Advice

2015

^AWR **^BGF** **^AAE** **^BUQ**

System Code **^BSC**

Contact Name **^CZP**

Contact Phone Number **^CZR** **^CZQ**

Contact Facsimile Number **^CZT** **^CZS**

E-Mail Address **^CZU**

Assessment Id **^BVN**

Assessment Amount **^CZV**

Advance Instalment Amount **^CZW**

Reason Code **^BVQ**

Assess./Advance Instal.-not paid-contribs. never received/held	Q
Assess./Advance Instal.-not paid-contribs. being transferred	P
Interest	I

Member Deceased Indicator **^BSQ**

Not received notification of Death	BLANK
Received notification of Death	Y

Member's Date of Death **^FRF**

SENSITIVE-when completed

***** NOTE *****

THIS FORM CANNOT BE LODGED WITH THE ATO AS A PAPER REPRESENTATION OF THE FORM.
FOR PAPER LODGEMENT PLEASE USE THE PRE PRINTED FORMAT ISSUED BY THE ATO.
