



# LWOP remittance advice

To accompany all payments for CSS members on leave without pay (LWOP)

## SECTION A Personal details

Reference number (AGS)

Salutation  Mr  Mrs  Ms  Miss  Other

Surname

Given name(s)

Parent employer

Temporary employer (if applicable)

For paydays (inclusive)  <sup>D</sup> <sup>D</sup> /  <sup>M</sup> <sup>M</sup> /  <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> to  <sup>D</sup> <sup>D</sup> /  <sup>M</sup> <sup>M</sup> /  <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>

**Note:** Employee contributions, employer liability and EPSC contributions are all based on the member's 'salary for superannuation purposes' on the member's last birthday. This salary information is available from the member's parent employer.

## SECTION B Superannuation employee contributions

Salary \$   
For superannuation purposes (See note)

Fortnightly amount \$

Number of paydays  days

Total \$

Form continued on next page

