

Date: \_\_\_\_\_

**LGISWA**

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West Leederville, WA 6007  
PO Box 1003  
West Perth WA 6872  
Tel (08) 9483 8888

[www.lgiswa.com.au](http://www.lgiswa.com.au)

## LGIS Member Dividend / Funding claim

To draw upon your local government's entitlement from LGIS Scheme surplus distributions, please complete the following details and return this form via email to [PRS.Accounts@lgiswa.com.au](mailto:PRS.Accounts@lgiswa.com.au) or to your LGIS Member Services Account Manager.

We will make the payment by EFT followed by remittance advice and a credit note.

Local government: \_\_\_\_\_

Name of (authorised) submitting officer: \_\_\_\_\_

LGIS contact: \_\_\_\_\_

Available funds \$\_\_\_\_\_ Funds requested – this claim \$\_\_\_\_\_ (net of GST)

Application of funds (what will you be spending them on?)

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**(office use)**

- ☐ Refer for Account Manager information/comments
- ☐ Running Balance to be updated following payment, including details of the intended application of the funds