



Remittance advice for universities

Please print clearly in black ink.

Use this form when remitting to State Super

Employer details

Employer number/code

Employer name

Authorising officer

Signature

Date (DD-MM-YYYY)

Remittance summary

EFT

Remittance amount

\$

Month

Note: Ensure the **Employer number/code** is entered in the **EFT description field**.

Email this form to STC_CRU@mercero.com on the same day the payment is made.

If you need help with this form

Contact your Employer Support Officer between 8:30am and 5:30pm AEST from Mon–Fri on 1300 142 708 OR email STC_Employer@mercero.com

