|  |  |
| --- | --- |
| First name\* |  |
| Last name\* |  |
| Email\* |  |
| Address\* |  |
| Mobile phone\*  |  |
| Business Phone \* |  |
| Company/Organisation name\* |  |
| Occupation\* | [ ]  An SMSF trustee/member[ ]  An accountant[ ]  An SMSF auditor [ ]  An adviser[ ]  Other professional |
| No of SMSFs managed\* |  |
| Subscription type\* |  |

Gabriela Rusu Superannuation Services subscription form

Fill in the form below to request a call back to discuss our services

\**Please complete this mandatory field*

Once you have completed this form, please submit it to grusu@grsuper.com.au. By submitting this form, you consent to being contacted by us. We will never share your details with anyone. For more details, please review our Privacy Policy.