

18 December 2015

The Trustee for Sonjo Super Fund 20 MATHESON GR HASSALL GROVE NSW 2761

netwealth Investments Ltd. ABN 85 090 569 109 AFSL 230975

Level 8/52 Collins Street MELBOURNE VIC 3000 PO Box 336 SOUTH MELBOURNE VIC 3205

netwealth Super Wrap Personal Super

Rollover Confirmation

RE: Transfer of Benefit for Jose Bento

We refer to the above named client's request to transfer their benefit to The Trustee for Sonjo Super Fund

Accordingly, please find enclosed:

- A cheque for the total amount of \$18,755.42.
- A Rollover Benefits Statement in respect of the amount transferred.

If you require any further information please contact our Investor Services Centre on Freecall 1800 888 223.

Client Details

Client name Jose Bento

Client number 118753

Account number 0001036244

Need Help?

Freecall Phone

1800 888 223

Fax

+61 3 9655 1300 +61 3 9655 1333



Email

contact@netwealth.com.au

Rollover Benefits Statement

Complete this form if you are a trustee of a superannuation fund or provider of a retirement savings account (RSA) and

any of the following apply:
- You are paying a rollover superannuation benefit to another fund or RSA, and you are not already providing all of this information electronically under the rollover data standards.

- You have paid a rollover superannuation benefit to another fund or RSA and are providing a statement about the rollover

to your member.

- You are the trustee of a non-complying fund and are paying member benefits to another superannuation fund or RSA (complete section D instead of section C).

SECTION A: Receiving Fund

Australian business number (ABN) : 58 374-155-723

The Trustee for Sonjo Super Fund Fund Name

20 MATHESON GR Postal Address : HASSALL GROVE Suburb/town/locality

State/territory : NSW Postcode 2761

Country (a) Unique superannuation identifier:

(b) Member client identifier

SECTION B: Member's Details

Tax File Number(TFN) : 141 015 148

Full Name

Title Mr Family Name Bento First Given Name Jose

Other Given Name(s)

20 MATHESON GROVE Residential Address

Suburb/town/locality HASSAL GROVE

: NSW State/territory Postcode 2761

Country : AUSTRALIA Date of Birth : 04 / 06 / 1965

: Male Sex

Daytime phone number Email address (if applicable)

ECTION C: Rollover Transaction Deta	ails		
Service period start date	18 /	02 / 1986	
Tax Components			
Tax-free component	\$	1,222.78	
KiwiSaver tax-free component	\$	0.00	
Taxable component			
Element taxed in the fund	\$	17,532.64	
Element untaxed in the fund	\$	0.00	
Tax components	s TOTAL		\$ 18,755.42
Preservation amounts			
Preserved amount	\$	18,755.42	
KiwiSaver preserved component	\$	0.00	
Restricted non-preserved amount	\$	0.00	
Unrestricted non-preserved amount	\$	0.00	

\$

18,755.42

Preservation amounts TOTAL

SECTION D: Non-complying funds

Contributions made to a non-complying fund on or after 10 May 2006

SECTION E: Transferring Fund

Fund ABN : 94 573 747 704

NETWEALTH SUPERANNUATION MASTER FUND Fund name

AMANDA ATKINSON Contact name

: 0396551300 Daytime phone number

Email address : contact@netwealth.com.au

SECTION F: Declaration

AUTHORISED REPRESENTATIVE DECLARATION

Complete this declaration if you are an authorised representative of the superannuation fund or other provider shown in section E.

I declare that:

- I have prepared the statement with the information supplied by the superannuation provider

- I have received a declaration made by the superannuation provider that the information provided to me for the preparation of this statement is true and correct

- I am authorised by the superannuation provider to give the information in the statement to the ATO.

: AMANDA ATKINSON Name

Date: 18 December 2015 Authorised representative signature

Tax agent number (if you are a registered tax agent)

Where to send this form

Do not send this form to the ATO

If the rollover data standards **do not apply** to the transaction, you must do all of the following:
- send the form to the receiving fund in Section A within seven days of paying them the rollover
- provide a copy to the member in section B within 30 days of paying the rollover
- keep a copy in your records for a period of five years

If the rollover data standards **do apply** to the transaction, you must do all of the following:
- comply with the requirements of the data standard for the fund-to-fund interaction (do not send this form to the receiving fund in section A)

- use this form only to provide a statement to the member in section B within 30 days of paying the rollover - keep a copy of the member statement in your records for a period of five years.



31 May 2016

The Trustee for Sonjo Super Fund 20 MATHESON GR HASSALL GROVE NSW 2761

netwealth investments Ltd ABN 85 090 569 109 AFSL 230975

Level 8/52 Collins Street MELBOURNE VIC 3000 PO Box 336 SOUTH MELBOURNE VIC 3205

netwealth Super Wrap Personal Super **Rollover Confirmation**

RE: Transfer of Benefit for Jose Bento

We refer to the above named client's request to transfer their benefit to The Trustee for Sonjo Super Fund

Accordingly, please find enclosed:

- A cheque for the total amount of \$10,000.00.
- A Rollover Benefits Statement in respect of the amount transferred.

If you require any further information please contact our Investor Services Centre on Freecall 1800 888 223.

Client Details

Client name Jose Bento

Client number 118753

Account number 0001036244

Need Help?

Freecall

1800 888 223

Fax

+61 3 9655 1300 +61 3 9655 1333

Email

Phone

contact@netwealth.com.au

Rollover Benefits Statement

Complete this form if you are a trustee of a superannuation fund or provider of a retirement savings account (RSA) and

any of the following apply:
- You are paying a rollover superannuation benefit to another fund or RSA, and you are not already providing all of this

information electronically under the rollover data standards.

- You have paid a rollover superannuation benefit to another fund or RSA and are providing a statement about the rollover

to your member.

- You are the trustee of a non-complying fund and are paying member benefits to another superannuation fund or RSA (complete section D instead of section C).

SECTION A: Receiving Fund

Australian business number (ABN) : 58 374-155-723

Fund Name : The Trustee for Sonjo Super Fund

Postal Address : 20 MATHESON GR Suburb/town/locality : HASSALL GROVE

State/territory : NSW Postcode : 2761

Country : (a) Unique superannuation identifier : (b) Member client identifier :

SECTION B: Member's Details

Tax File Number(TFN) : 141 015 148

Full Name

Title : Mr
Family Name : Bento
First Given Name : Jose

Other Given Name(s)

Residential Address : 20 MATHESON GROVE

Suburb/town/locality : HASSAL GROVE

State/territory : NSW Postcode : 2761

Country : AUSTRALIA Date of Birth : 04 / 06 / 1965

Sex : Male

Douting phone number

Daytime phone number Email address (if applicable)

SECTION C: Rollover Transaction Details

Service period start date 18 / 02 / 1986 **Tax Components** Tax-free component 719.45 KiwiSaver tax-free component 0.00 Taxable component Element taxed in the fund 9,280.55 Element untaxed in the fund 0.00 Tax components TOTAL 10,000.00 **Preservation amounts** Preserved amount 10,000.00 \$ KiwiSaver preserved component 0.00 Restricted non-preserved amount 0.00 Unrestricted non-preserved amount 0.00 **Preservation amounts TOTAL** 10,000.00

SECTION D: Non-complying funds

Contributions made to a non-complying fund on or after 10 May 2006

0.00

SECTION E: Transferring Fund

Fund ABN

: 94 573 747 704

Fund name

NETWEALTH SUPERANNUATION MASTER FUND

Contact name

ALISTAIR DENSLEY

Daytime phone number

: 0396551300

Email address

: contact@netwealth.com.au

SECTION F: Declaration

AUTHORISED REPRESENTATIVE DECLARATION

Complete this declaration if you are an authorised representative of the superannuation fund or other provider shown in section E.

I declare that:

- I have prepared the statement with the information supplied by the superannuation provider

- I have received a declaration made by the superannuation provider that the information provided to me for the preparation of this statement is true and correct

- I am authorised by the superannuation provider to give the information in the statement to the ATO.

Name

: ALISTAIR DENSLEY

Authorised representative signature

Date: 31 May 2016

Tax agent number (if you are a registered tax agent)

Where to send this form

Do not send this form to the ATO

If the rollover data standards **do not apply** to the transaction, you must do all of the following:
- send the form to the receiving fund in Section A within seven days of paying them the rollover
- provide a copy to the member in section B within 30 days of paying the rollover
- keep a copy in your records for a period of five years

If the rollover data standards do apply to the transaction, you must do all of the following:
- comply with the requirements of the data standard for the fund-to-fund interaction (do not send this form to the receiving fund in section A)

- use this form only to provide a statement to the member in section B within 30 days of paying the rollover - keep a copy of the member statement in your records for a period of five years.



Self-managed super fund trustee declaration

I understand that as an individual trustee or director of the corporate trustee of

Fund name

SONTO SUPER FUND

I am responsible for ensuring that the fund complies with the *Superannuation Industry (Supervision) Act 1993* (SISA) and other relevant legislation. The Commissioner of Taxation (the Commissioner) has the authority and responsibility for administering the legislation and enforcing the fund's compliance with the law.

I must keep myself informed of changes to the legislation relevant to the operation of my fund and ensure the trust deed is kept up to date in accordance with the law and the needs of the members.

If I do not comply with the legislation, the Commissioner may take the following actions:

- impose administrative penalties on me
- give me a written direction to rectify any contraventions or undertake a course of education
- enter into agreements with me to rectify any contraventions of the legislation
- disqualify me from being a trustee or director of a corporate trustee of any superannuation fund in the future
- remove the fund's complying status, which may result in significant adverse tax consequences for the fund
- prosecute me under the law, which may result in fines or imprisonment.

Sole purpose

I understand it is my responsibility to ensure the fund is only maintained for the purpose of providing benefits to the members upon their retirement (or attainment of a certain age) or their beneficiaries if a member dies. I understand that I should regularly evaluate whether the fund continues to be the appropriate vehicle to meet this purpose.

Trustee duties

I understand that by law I must at all times:

- act honestly in all matters concerning the fund
- exercise skill, care and diligence in managing the fund
- act in the best interests of all the members of the fund
- ensure that members only access their super benefits if they have met a legitimate condition of release
- refrain from entering into transactions that circumvent restrictions on the payment of benefits
- ensure that my money and other assets are kept separate from the money and other assets of the fund
- take appropriate action to protect the fund's assets (for example, have sufficient evidence of the ownership of fund assets)
- refrain from entering into any contract or do anything that would prevent me from, or hinder me in, properly performing or exercising my functions or powers as a trustee or director of the corporate trustee of the fund
- allow all members of the fund to have access to information and documents as required, including details about
 - the financial situation of the fund
 - the investments of the fund
 - the members' benefit entitlements.

I also understand that by law I must prepare, implement and regularly review an investment strategy having regard to all the circumstances of the fund, which include, but are not limited to:

- the risks associated with the fund's investments
- the likely return from investments, taking into account the fund's objectives and expected cash flow requirements
- investment diversity and the fund's exposure to risk due to inadequate diversification
- the liquidity of the fund's investments having regard to the fund's expected cash flow requirements in discharging its existing and prospective liabilities (including benefit payments)
- whether the trustees of the fund should hold insurance cover for one or more members of the fund.

Accepting contributions and paying benefits

I understand that I can only accept contributions and pay benefits (income streams or lump sums) to members or their beneficiaries when the conditions specified in the law and the fund trust deed have been met.

Investment restrictions

I understand that, as a trustee or director of the corporate trustee of the fund, subject to certain limited exceptions specified in the law, I am prohibited from:

■ lending money of the fund to, or providing financial assistance to, a member of the fund or a member's relative (financial assistance means any assistance that improves the financial position of a person directly or indirectly, including the provision of credit)

NAT 71089-08.2014 Page 1

- acquiring assets (other than business real property, listed securities, certain in-house assets and acquisitions made under mergers allowed by special determinations or acquisitions as a result of a breakdown of a relationship) for the fund from members or other related parties of the fund
- borrowing money (or maintaining an existing borrowing) on behalf of the fund except in certain limited circumstances (while limited recourse borrowing arrangements are permitted, they can be complex and particular conditions must be met to ensure that legal requirements are not breached)
- having more than 5% of the market value of the fund's total assets at the end of the income year as in-house assets (these are loans to, or investments in, related parties of the fund including trusts or assets subject to a lease or lease arrangement between the trustee and a member, relative or other related party)
- entering into investments that are not made or maintained on an arm's length (commercial) basis (this ensures the purchase or sale price of the fund's assets and any earnings from those assets reflects their market value).

Administration

I understand that the trustees of the fund must:

- keep and retain for at least 10 years
 - minutes of all trustee meetings at which matters affecting the fund were considered (this includes investment decisions and decisions to appoint members and trustees)
 - records of all changes of trustees, including directors of the corporate trustee
 - each trustee's consent to be appointed as a trustee of the fund or a director of the corporate trustee
 - all trustee declarations
 - copies of all reports given to members
- ensure that the following are prepared and retained for at least five years
 - an annual statement of the financial position of the fund
 - an annual operating statement
 - copies of all annual returns lodged
 - accounts and statements that accurately record and explain the transactions and financial position of the fund
- appoint an approved SMSF auditor each year, no later than 45 days before the due date for lodgment of the fund's annual return and provide documents to the auditor as requested
- lodge the fund's annual return, completed in its entirety, by the due date
- notify the ATO within 28 days of any changes to the
 - membership of the fund, or trustees or directors of the corporate trustee
 - name of the fund
 - contact person and their contact details
 - postal address, registered address or address for service of notices for the fund
- notify the ATO in writing within 28 days if the fund becomes an Australian Prudential Regulation Authority (APRA) regulated fund.

DECLARATION

By signing this declaration I acknowledge that I understand my duties and responsibilities as a trustee or director of the corporate trustee of the self-managed superannuation fund named on this declaration (or if the fund's name changes, that name). I understand that:

- I must ensure this document is retained for at least 10 years or while I remain a trustee or director of the corporate trustee (whichever is longer) and, if I fail to do this, penalties may apply.
- I may have to make this document available for inspection by a member of staff of the ATO and, if I fail to do this, penalties may apply.
- I do not have access to the government's financial assistance program that is available to trustees of APRA regulated funds in the case of financial loss due to fraudulent conduct or theft.

Trustee's or director's name	
JOSE BENTO	
Trustee's or director's signature	
Bento	Date Day Month Year Jao 15
Witness' name (witness must be 18 years old or over)	
DULCE BENTO	
Witness' signature	
	Date

30/11/2015



երդապրդիրդելուն.

014

THE TRUSTEE 14 DUIGAN ST MIDDLETON GRANGE NSW 2171

Your Statement

 Statement 3
 (Page 1 of 1)

 Account Number
 06 2317 10845882

 Statement Period
 11 Jun 2016 - 10 Dec 2016

 Closing Balance
 \$105,164.70 CR

 Enquiries
 13 1998

(24 hours a day, 7 days a week)



Direct Investment Account

Your SMSF Commonwealth Direct Investment Account specifically designed for your Self Managed Super Fund can grow your savings while you plan your next investment. Earn a competitive rate of interest on balances over \$10,000. You can enjoy instant access to your money through ATMs, NetBank, EFTPOS, telephone banking and bank branches.

Name: JOSE MANUEL BENTO AND SONIA MARIA BENTO

AS TRUSTEES FOR SONJO SUPER FUND

Note: Please check that the entries listed on this statement are correct. For further information on your

account including; details of features, fees, any errors or complaints, please contact us on the details

above. Proceeds of cheques are not available until cleared.

Date Tr	ransaction	Debit	Credit	Balance
11 Jun 20	16 OPENING BALANCE			\$54,344.81 CR
11 Jun Ch	nq Dep Branch W'field Lvrpool		50,000.00	\$104,344.81 CR
	REDIT INTEREST EARNED on this account June 30, 2016 is \$439.39			
01 Jul Cre	edit Interest		126.11	\$104,470.92 CR
01 Aug Cre	edit Interest		155.28	\$104,626.20 CR
01 Sep Cre	edit Interest		146.19	\$104,772.39 CR
01 Oct Cre	redit Interest		129.17	\$104,901.56 CR
01 Nov Cr	redit Interest		133.64	\$105,035.20 CR
01 Dec Cr	redit Interest		129.50	\$105,164.70 CR
10 Dec 20	116 CLOSING BALANCE			\$105,164.70 CR

Opening balance	-	Total debits	+	Total credits	=	Closing balance
\$54,344.81 CR		Nil		\$50,819.89		\$105,164.70 CR

Your Credit Interest Rate Summary

Date	Balance	Standard Credit Interest Rate (p.a.)		
10 Dec	Less than \$10,000.00 \$10,000.00 and over	0.00% 1.50%		

Note. Interest rates are effective as at the date shown but are subject to change,