

B M BEVAN & R J WHITESIDE SUPERANNUATION FUND (FUND)

NOTICE TO MEMBERS OF VARIATION TO TRUST DEED

Dear Bronwyn Margaret Bevan

This notice to members explains the nature and purpose of the variation to the trust deed for the Fund that has recently been effected.

Nature and Purpose

The nature and purpose of the variation to the trust deed is in order to:

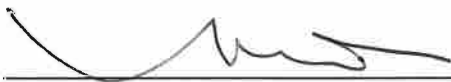
- ensure the Fund complies and will continue to comply with the self managed superannuation fund (**SMSF**) requirements of the *Superannuation Industry (Supervision) Act 1993* (**SIS Act**) and the *Superannuation Industry (Supervision) Regulations 1994* (**SIS Regulations**); and
- ensure the Fund is most effectively managed for the benefit of members and their dependants by providing the trustee with relevant and current powers and instructions.

Essentially, the governing rules of the Fund have been replaced with new governing rules which reflect these requirements.

Accrued Benefits

The variation was drafted in accordance with the requirements and limitations of the variation clause of the trust deed for the Fund and accordingly, no members' accrued benefits have been varied or adversely affected in any way.

DATED



Signed on behalf of the Trustee



NON-BINDING DEATH BENEFIT NOMINATION

Complete this form if you wish to nominate who should receive your superannuation benefits on your death, but you do not want that nomination to be binding on the trustee.

Details of the Fund and Member

Fund Name: _____

Member Name: _____

Member Address: _____

Beneficiaries

The person or persons nominated must be either a Dependant or Dependents (as defined under the *Superannuation Industry (Supervision) Act 1993* (Cth) and the *Superannuation Industry (Supervision) Regulations 1994* (Cth)) or your legal personal representative (**LPR**). If you wish to nominate your LPR, please write "LPR" in the first column, below.

To the Trustee of the Fund:

I request the trustee to pay, upon my death, benefits to the person or persons, and in the proportions, nominated below:

Full Name of Beneficiary	Full Address of Beneficiary (write LPR if the Beneficiary is your LPR)	Beneficiary's Relationship to the Member	% of Total Benefit
Total must equal 100%			100%

Alternate Beneficiaries

If any of the Beneficiaries nominated above predecease me, I request the trustee to pay, upon my death, the part of my death benefit that would otherwise have been payable to the deceased Beneficiary noted above, to the person or persons nominated below:

Name of the initial Beneficiary nominated	Name of the Alternate Beneficiary taking the place of the deceased Beneficiary	Alternate Beneficiary's Relationship to the Member	Proportion of the initial Beneficiary's Benefit to be payable to the Alternate Beneficiary

Member to Sign Non-Binding Death Benefit Notice

You must sign this form below.

Signature of Member

Date (Please ensure that you date this part of the form)

B M BEVAN & R J WHITESIDE SUPERANNUATION FUND (FUND)

NOTICE TO MEMBERS OF VARIATION TO TRUST DEED

Dear Richard John Whiteside

This notice to members explains the nature and purpose of the variation to the trust deed for the Fund that has recently been effected.

Nature and Purpose

The nature and purpose of the variation to the trust deed is in order to:

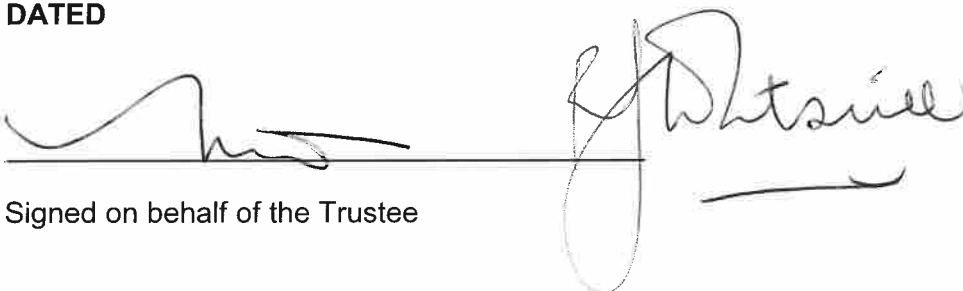
- ensure the Fund complies and will continue to comply with the self managed superannuation fund (**SMSF**) requirements of the *Superannuation Industry (Supervision) Act 1993* (**SIS Act**) and the *Superannuation Industry (Supervision) Regulations 1994* (**SIS Regulations**); and
- ensure the Fund is most effectively managed for the benefit of members and their dependants by providing the trustee with relevant and current powers and instructions.

Essentially, the governing rules of the Fund have been replaced with new governing rules which reflect these requirements.

Accrued Benefits

The variation was drafted in accordance with the requirements and limitations of the variation clause of the trust deed for the Fund and accordingly, no members' accrued benefits have been varied or adversely affected in any way.

DATED

A handwritten signature in dark ink, appearing to read 'R J Whiteside', is written over a horizontal line. The signature is cursive and stylized.

Signed on behalf of the Trustee

NON-BINDING DEATH BENEFIT NOMINATION

Complete this form if you wish to nominate who should receive your superannuation benefits on your death, but you do not want that nomination to be binding on the trustee.

Details of the Fund and Member

Fund Name: _____

Member Name: _____

Member Address: _____

Beneficiaries

The person or persons nominated must be either a Dependant or Dependents (as defined under the *Superannuation Industry (Supervision) Act 1993* (Cth) and the *Superannuation Industry (Supervision) Regulations 1994* (Cth)) or your legal personal representative (LPR). If you wish to nominate your LPR, please write "LPR" in the first column, below.

To the Trustee of the Fund:

I request the trustee to pay, upon my death, benefits to the person or persons, and in the proportions, nominated below:

Full Name of Beneficiary	Full Address of Beneficiary (write LPR if the Beneficiary is your LPR)	Beneficiary's Relationship to the Member	% of Total Benefit
Total must equal 100%			100%

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If any of the Beneficiaries nominated above predecease me, I request the trustee to pay, upon my death, the part of my death benefit that would otherwise have been payable to the deceased Beneficiary noted above, to the person or persons nominated below:

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