



9th July, 2010

Ian & Alison Petherick
7 Inspiration Court
BUNDABERG QLD 4670

Dear Ian & Alison,

I have enclosed documents and trust deeds for the formation of your self managed super fund. I will describe the forms to be signed below;

1. Trust Deeds:

The trust deeds (2) are the rules of your fund. The deed is compliant with the SIS Act 1993. Please sign both copies as indicated. You both sign as trustees and members.

2. Other minutes to sign are as follows:

Confirmation of Compliance
Notice of Consent to Act as Trustee
Minutes of Meeting
Minutes of a meeting of the Trustees
Minutes to establish bank account
Application for membership (x2)

Please do not date the forms and we will witness your signatures.

Yours faithfully,


Peter Thompson

**APPLICATION FOR MEMBERSHIP
OF IS & AM Petherick Superannuation Fund**

I, Alison Marjorie Petherick

Of 7 Inspiration Court
Bundaberg Qld 4670

Date of Birth 02/08/1947

Hereby apply for membership upon the terms and conditions set out in the Trust Deed governing the IS & AM Petherick Superannuation Fund.

I agree and undertake as follows:

- I will be bound by the Deed governing the fund.
- I understand the terms and conditions of the Deed. Particularly the terms and conditions of the Deed concerning benefits payable.
- I acknowledge I have received all information needed by me for the purpose of:
 3. Understanding the main features of the fund; and
 4. Making an informed judgment about the management and financial condition of the fund.
- Making an informed judgment about the investment performance of the fund.
- I acknowledge that as the date of this application I have been advised of the current Trustee(s) and agree to their continuing appointment.

NOMINATION OF BENEFICIARY

I hereby nominate the following person(s) to receive the benefit payable by the Trustee(s) of the Fund in the event of my death.

Person	Relationship to Member	Proportion of Death Benefit
IAN STANLEY PETHERICK	SPOUSE	100%

Alison M. Petherick
Applicant's Signature

12th July 2010
Date

[Signature]
Witness

12/7/2010
Date

Peth 10

Dated 12/7/2010.

Alison Marjorie Petherick
7 Inspiration Court
Bundaberg Qld 4670

Dear Alison,

We acknowledge your application for membership of the IS & AM Petherick Superannuation Fund.

We are pleased to advise that the Trustee(s) of this fund at a meeting held on July 12, 2010 have accepted your application.

Your membership commenced on July, 12, 2010.

Yours faithfully

Ian Stanley Petherick

Trustee
Ian Stanley Petherick

Alison Marjorie Petherick

Trustee
Alison Marjorie Petherick

BINDING NOMINATION OF BENEFICIARY FORM

To: Alison Marjorie Petherick- Trustee of the IS & AM Petherick Superannuation Fund

If I die while a member of the fund, I require that my fund death benefit be paid to the following nominated person(s) in the amount as set out below:

# Full name of beneficiary	Relationship	Percentage allocation**
IAN STAWLEY PETHERICK	SPOUSE	100

- # Must be a dependant at the time of your death or your legal personal representative
- * Only nominate your legal personal representative if you want your death benefit to be paid into your estate after your death and dealt with under your Will.
- ** Please ensure allocations add up to 100%.

I understand that:

- The above nomination is binding on the Trustee subject to this form being valid and effective at the date of my death;
- This form supersedes any previous nomination or "Binding nomination of beneficiary form" provided to the Trustee; and
- This is not a will or a codicil to my will and does not operate as a testamentary disposition.

[Please complete your personal details and sign]

Member Surname PETHERICK
 Given Names ~~Mr/Mrs/Ms~~ ALISON MARJORIE
 Member Signature " A.M. Petherick Date 12 / 7 / 2013

[Witnesses to complete their personal details and sign]

I declare that this form was signed and dated by the above Member in my presence.

Witness Signature Peter Christian Thomas Date 12 / 7 / 2013
 Witness Name PETER CHRISTIAN THOMAS
 Address of Witness 314 COURAGE STREET BUNOABONG

I declare that this form was signed and dated by the above Member in my presence.

Witness Signature _____ Date ____ / ____ / ____
 Witness Name _____
 Address of Witness _____

**NOTES REGARDING BINDING NOMINATION OF
BENEFICIARY FOR THE IS & AM Petherick Superannuation Fund**

In the event of your death, the Trustee of the fund must pay your death benefit which is payable from the fund to your nominated beneficiary/beneficiaries, if the Trustee receives a valid binding nomination from you.

If you wish to nominate a beneficiary/beneficiaries to whom your death benefit will be paid by the Trustee on your death, you may complete this form. The form must be completed in accordance with the following important requirements in order to be valid and binding and return it to the Trustee.

Important requirements

You can only nominate your dependant(s) or your legal personal representative to receive your fund death benefit.

- A **dependant** includes your spouse (including de facto), children (including step children, adopted or ex-nuptial children) and any other person who in the opinion of the Trustee is financially dependent upon you at the time of your death.
- Your **legal personal representative** is the person nominated in your will as executor. If you die without a will, your legal representative is the administrator of your estate if one is applied for and appointed by the court.

Note:

If you do **not** have any dependants or a legal personal representative, you cannot use this form. See note 3 below.

You must complete **all** sections of this form below.

This form must be signed by you and dated in the presence of **two** witnesses:

3. Who are both at least 18 years old; and
4. You list neither as a beneficiary in this form.

Failure to comply with the above requirements may invalidate your nomination

Please note:

6. This form is valid for **3 years** after the day it is first signed or last confirmed or amended by you. At any time you may revoke the nomination(s) made in this form, or amend the details, by requesting and completing a new "Binding nomination of beneficiary form" and forwarding it to the Trustee.
7. If you do **not** have any dependants or a legal personal representative, the Trustee has discretion to pay your death benefit to any other person.
8. If this form is, or becomes, invalid, the Trustee has the discretion to pay your death benefit:
 1. to any of your dependants or your legal personal representative; or
 2. if you do not have any dependants or a legal personal representative, to any other person.
9. This form does not constitute a will or testamentary disposition. Your superannuation is not considered to be your "property" for the purposes of making a will or any other form of disposition. Your interest in the fund is held on trust, subject to the terms of the trust deed which allow you to make a nomination in favour of your dependants or your legal personal representative only.
10. If you nominate your legal personal representative in the form, you should have a valid will in place to overcome the need for someone to apply for letters of administration from the Court to appoint an administrator of your estate.

APPLICATION FOR MEMBERSHIP
OF IS & AM Petherick Superannuation Fund

I, Ian Stanley Petherick

Of 7 Inspiration Court
 Bundaberg Qld 4670

Date of Birth 02/05/1946

Hereby apply for membership upon the terms and conditions set out in the Trust Deed governing the IS & AM Petherick Superannuation Fund.

I agree and undertake as follows:

- I will be bound by the Deed governing the fund.
- I understand the terms and conditions of the Deed. Particularly the terms and conditions of the Deed concerning benefits payable.
- I acknowledge I have received all information needed by me for the purpose of:
 1. Understanding the main features of the fund; and
 2. Making an informed judgment about the management and financial condition of the fund.
- Making an informed judgment about the investment performance of the fund.
- I acknowledge that as the date of this application I have been advised of the current Trustee(s) and agree to their continuing appointment.

NOMINATION OF BENEFICIARY

I hereby nominate the following person(s) to receive the benefit payable by the Trustee(s) of the Fund in the event of my death.

Person	Relationship to Member	Proportion of Death Benefit
ALISON MARJORIE PETHERICK	SPOUSE	100%

x Ian A Petherick

Applicant's Signature

Neil L Thompson

Witness

12th July 2010

Date

12th July 2010

Date

Dated 12/7/2010

Ian Stanley Petherick
7 Inspiration Court
Bundaberg Qld 4670

Dear Ian,

We acknowledge your application for membership of the IS & AM Petherick Superannuation Fund.

We are pleased to advise that the Trustee(s) of this fund at a meeting held on JULY 12, 2010 have accepted your application.

Your membership commenced on JULY 12, 2010

Yours faithfully

Ian A. Petherick

Trustee
Ian Stanley Petherick

A.M. Petherick

Trustee
Alison Marjorie Petherick

BINDING NOMINATION OF BENEFICIARY FORM

To: Ian Stanley Petherick - Trustee of the IS & AM Petherick Superannuation Fund

If I die while a member of the fund, I require that my fund death benefit be paid to the following nominated person(s) in the amount as set out below:

# Full name of beneficiary	Relationship	Percentage allocation**
ANISON MARIJORIE PETHERICK	SPOUSE	100

- # Must be a dependant at the time of your death or your legal personal representative
- * Only nominate your legal personal representative if you want your death benefit to be paid into your estate after your death and dealt with under your Will.
- ** Please ensure allocations add up to 100%.

I understand that:

- The above nomination is binding on the Trustee subject to this form being valid and effective at the date of my death;
- This form supersedes any previous nomination or "Binding nomination of beneficiary form" provided to the Trustee; and
- This is not a will or a codicil to my will and does not operate as a testamentary disposition.

[Please complete your personal details and sign]

Member Surname PETHERICK
Given Names Mr/Mrs/Ms Ian STANLEY
Member Signature Ian A Petherick Date 12 / 7 / 2010

[Witnesses to complete their personal details and sign]

I declare that this form was signed and dated by the above Member in my presence.

Witness Signature Peter Christian Thompson Date 12 / 7 / 2010

Witness Name Peter Christian Thompson

Address of Witness 314 Bourgois Street Bourgois

I declare that this form was signed and dated by the above Member in my presence.

Witness Signature _____ Date ____ / ____ / ____

Witness Name _____

Address of Witness _____

**NOTES REGARDING BINDING NOMINATION OF
BENEFICIARY FOR THE IS & AM Petherick Superannuation Fund**

In the event of your death, the Trustee of the fund must pay your death benefit which is payable from the fund to your nominated beneficiary/beneficiaries, if the Trustee receives a valid binding nomination from you.

If you wish to nominate a beneficiary/beneficiaries to whom your death benefit will be paid by the Trustee on your death, you may complete this form. The form must be completed in accordance with the following important requirements in order to be valid and binding and return it to the Trustee.

Important requirements

You can only nominate your dependant(s) or your legal personal representative to receive your fund death benefit.

- A **dependant** includes your spouse (including de facto), children (including step children, adopted or ex-nuptial children) and any other person who in the opinion of the Trustee is financially dependent upon you at the time of your death.
- Your **legal personal representative** is the person nominated in your will as executor. If you die without a will, your legal representative is the administrator of your estate if one is applied for and appointed by the court.

Note:

If you do **not** have any dependants or a legal personal representative, you cannot use this form. See note 3 below.

You must complete **all** sections of this form below.

This form must be signed by you and dated in the presence of **two** witnesses:

1. Who are both at least 18 years old; and
2. You list neither as a beneficiary in this form.

Failure to comply with the above requirements may invalidate your nomination

Please note:

1. This form is valid for **3 years** after the day it is first signed or last confirmed or amended by you. At any time you may revoke the nomination(s) made in this form, or amend the details, by requesting and completing a new "Binding nomination of beneficiary form" and forwarding it to the Trustee.
2. If you do **not** have any dependants or a legal personal representative, the Trustee has discretion to pay your death benefit to any other person.
3. If this form is, or becomes, invalid, the Trustee has the discretion to pay your death benefit:
 1. to any of your dependants or your legal personal representative; or
 2. if you do not have any dependants or a legal personal representative, to any other person.
4. This form does not constitute a will or testamentary disposition. Your superannuation is not considered to be your "property" for the purposes of making a will or any other form of disposition. Your interest in the fund is held on trust, subject to the terms of the trust deed which allow you to make a nomination in favour of your dependants or your legal personal representative only.
5. If you nominate your legal personal representative in the form, you should have a valid will in place to overcome the need for someone to apply for letters of administration from the Court to appoint an administrator of your estate.

Consent to Appointment of Trustee

I, Ian Stanley Petherick, of 7 Inspiration Court, Bundaberg consent to my continuing appointment as a trustee of IS & AM Petherick Superannuation Fund and agree that I will provide no less than 30 days notice if any intention I have to resign my appointment.

I further state that:-

1. I am aware that I am disqualified from acting or continuing to act as a trustee of a superannuation entity if:-

(a) At any time:-

(i) I am or have been convicted of an offence against or arising out of a law or the Commonwealth, a State, a Territory or a foreign country in respect of dishonest conduct at any time; or

(ii) A civil penalty order is made in relation to me under the Superannuation Industry (Supervision) Act 1993; or

(b) I am a person who is insolvent or under administration.

2. None of the qualifying conditions set out above apply to me and I am able to act as trustee of a superannuation entity.

I UNDERTAKE that if I become subject to any of the qualifying conditions set out above I will immediately cease to act as trustee of a superannuation entity and notify the Commissioner in writing.

Ian A Petherick

.....
Ian Stanley Petherick

Dated this *18th* day of *February* 2012

Consent to Appointment of Trustee

I, Alison Marjorie Petherick, of 7 Inspiration Court, Bundaberg consent to my continuing appointment as a trustee of IS & AM Petherick Superannuation Fund and agree that I will provide no less than 30 days notice if any intention I have to resign my appointment.

I further state that:-

1. I am aware that I am disqualified from acting or continuing to act as a trustee of a superannuation entity if:-

(a) At any time:-

(i) I am or have been convicted of an offence against or arising out of a law or the Commonwealth, a State, a Territory or a foreign country in respect of dishonest conduct at any time; or

(ii) A civil penalty order is made in relation to me under the Superannuation Industry (Supervision) Act 1993; or

(b) I am a person who is insolvent or under administration.

2. None of the qualifying conditions set out above apply to me and I am able to act as trustee of a superannuation entity.

I UNDERTAKE that if I become subject to any of the qualifying conditions set out above I will immediately cease to act as trustee of a superannuation entity and notify the Commissioner in writing.



Alison Marjorie Petherick

Dated this 18th day of February, 2012

NOTES OF A MEETING BETWEEN

Present Ian Stanley Petherick
Alison Marjorie Petherick

Held at: 7 Inspiration Court
Bundaberg Qld 4670

On the: 09/06/2010

Establishment: Resolved to establish forthwith a superannuation fund to provide benefits for eligible person or for their dependants and that the commencement date of the fund be the JULY 1, 2010.

Purpose: Resolved that the purpose of the fund is to generate retirement and other ancillary benefits for members of this fund.

Name: Resolved that the name of the fund be **IS & AM Petherick Superannuation Fund**.

Trustees: Resolved that the signature(s) that appear below be appointed as Trustee(s).

Resolved that the superannuation Trust Deed be duly executed as required.

Resolved to comply with the obligations of the Trustee as set out in the superannuation Trust Deed.

Resolved to give notice to the ATO in the approved form signed by the trustee pursuant to section 10 of the Act, that the Act is to apply in relation to the fund.

Signed as a correct record

Ian Stanley Petherick
Ian Stanley Petherick

12th July 2010
Date

Alison Marjorie Petherick
Alison Marjorie Petherick

12th July 2010
Date

Dated 12/07/2010,

Ian Stanley Petherick & Alison Marjorie Petherick
7 Inspiration Court
Bundaberg Qld 4670

CONFIRMATION OF COMPLIANCE STATUS
OF IS & AM Petherick Superannuation Fund

To Whom It May Concern

This letter can be given by fund members to the trustee(s) of any existing superannuation arrangement to confirm the **IS & AM Petherick Superannuation Fund** is a complying superannuation fund or to any contribution employer to the fund to satisfy the requirements of the Superannuation Guarantee Act.

IS & AM Petherick Superannuation Fund is a resident superannuation fund constituted under a Trust Deed dated July 1, 2010

The Trustees of the fund being **Ian Stanley Petherick** and **Alison Marjorie Petherick** certify as follows:

- Following the fund's establishment an application has been made to the ATO for the fund to become a regulated Superannuation Fund within the meaning of the Superannuation Industry (Supervision) Act 1993 (SIS).
- The Trust Deed allows funds to be rolled over or transferred to this fund.
- The requirements of the fund for the preservation of benefits satisfy the preservation standards set out in SIS.
- The fund will conduct its administration procedures so as to comply with the requirements of SIS.
- The fund is not subject to a direction by the ATO under Section 63 of SIS not to accept contributions.

Yours faithfully

Ian Stanley Petherick
Ian Stanley Petherick

Alison Marjorie Petherick
Alison Marjorie Petherick

MINUTES OF A MEETING OF THE TRUSTEES
OF IS & AM Petherick Superannuation Fund

Present: Ian Stanley Petherick
Alison Marjorie Petherick

Held at: 7 Inspiration Court
Bundaberg Qld 4670

On the: 09/06/2010

Resolved that the following members be approved for membership and that the members be advised of their acceptance.

Ian Stanley Petherick
Alison Marjorie Petherick

Resolved to forward a notice in compliance with the requirements of Division 2.3 of the Superannuation Industry (Supervision) Regulations to the new members. The information details what the Trustee reasonably believes that a member would reasonably need for the purpose of understanding the following:

- The main features of the fund;
 - The management and financial condition of the fund; and
 - The investment performance of the fund.
-

Appointment of Fund Officers

Resolved to appoint the following officers:

Administrator: Enrich Financial Services

Address: PO Box 583 Bundaberg Qld 4670

Auditor: Paul D Medwin

Address: 3 Macpherson Court Bundaberg Qld 4670

Accountant: Enrich Financial Services
Address: 51B Woongarra Street Bundaberg Qld 4670

Bank Account: Resolved to establish a bank account titled **Ian Stanley Petherick & Alison Marjorie Petherick as Trustees for IS & AM Petherick Superannuation Fund** and that the account and all dealings with the bank shall be operated by any one of the Signatories.

Signature of Documents: Resolved that the person(s) shown below be entitled to sign on the fund's behalf receipts, acceptances, endorsements, releases, contracts and documents.

Ian Stanley Petherick

Ian A Petherick

Alison Marjorie Petherick

A.M. Petherick

Signed as a correct record.

Ian A Petherick
Chairperson

12th July 2010
Date



002

THE TRUSTEE FOR IS & AM PETHERICK
SUPERANNUATION FUND
PO BOX 583
BUNDABERG QLD 4670

Our reference: 7100341230689
TFN: 917 977 541

29 July 2010

Please send all future information about your superannuation fund to us

Dear Sir/Madam

We recently received information from you about THE TRUSTEE FOR IS & AM PETHERICK SUPERANNUATION FUND.

You have chosen to make this a regulated self-managed superannuation fund (SMSF). As we are responsible for regulating this type of fund, all future information you provide about THE TRUSTEE FOR IS & AM PETHERICK SUPERANNUATION FUND, including your SMSF annual return, should be sent to us.

More useful information

On the back of this letter you'll find some guidance and useful links for running a self-managed superannuation fund. If you'd like to discuss something with us you can phone us on **13 10 20** between 8.00am and 6.00pm, Monday to Friday. We'll be happy to help.

Yours faithfully

Paul Duffus
Deputy Commissioner of Taxation





Australian Business Register

Australian business number(ABN) : **50 904 642 761**

Entity name : **THE TRUSTEE FOR IS & AM PETHERICK
SUPERANNUATION FUND**

Trading Name : **not applicable**
(See reverse for additional trading names.)

ABN Status : **Registered**

ABN Registration Date : **1 July 2010**

Postal Address : **PO BOX 583
BUNDABERG QLD 4670**

Business Address : **7 INSPIRATION COURT
AVOCA QLD 4670**

Type of Entity : **Regulated Self Managed Super Fund**

Industry Code (ANZSIC) : **63300**

Trustee Name : **MR IAN STANLEY PETHERICK**
(See reverse for additional trustee names.)

PO Box 908
Albury NSW 2640



Australian Government
Australian Business Register



THE TRUSTEE FOR IS & AM PETHERICK
SUPERANNUATION FUND
PO BOX 583
BUNDABERG QLD 4670

Date of Issue
29 July 2010

Client Enquiries
Telephone: 13 28 66
Facsimile: 1300 130 911

Dear Sir/Madam

**Notification of your Australian business number
For your information**

I am pleased to advise that you are now registered in the Australian Business Register (ABR).

Your Australian business number (ABN) is **50 904 642 761**.

Your ABN registration is effective as of **1 July 2010**.

Please check the enclosed list of ABN details recorded for your business or organisation are correct, advising us if they are not.

What you need to know about your ABN

We may provide your details to other eligible government agencies to streamline government and business interactions.

Some of your ABN details will also be made available to the public via ABN Lookup at www.abr.business.gov.au

You need to update your ABN record within 28 days of changes to your details. You can make these changes online once you have an AUSkey - a single key to access government online services. Go to www.abr.gov.au/AUSkey to register.

Alternatively, you can update your details by contacting us on **13 28 66** between 8.00am and 6.00pm, Monday to Friday.

Deductible gift recipient, income tax exempt fund and/or tax concession charity

If you have indicated that you require endorsement as a deductible gift recipient, income tax exempt fund and/or tax concession charity, an application will be sent to you shortly.

Review rights

You can lodge an objection to the date on which your registration takes effect. You will need to do this in writing within 60 days from the date of service of this notice. For information about your objection rights, visit www.abr.gov.au select Help and search for 'objections'.

More information

If you need more information, please visit our website at www.abr.gov.au or phone us on **13 28 66** between 8.00am and 6.00pm, Monday to Friday.

Protecting your privacy when you phone us

If you phone us, we need to know we are talking to the correct person before providing information. We will ask you for details only you or your authorised representative would know. It would be helpful if you have your tax file number or ABN ready when you phone us.

Yours faithfully

Michael D'Ascenzo
Registrar of the Australian Business Register and
Commissioner of Taxation



Tax Agent Portal

Transaction completed

13 Jan 2012 15:31:55 (EST)

The receipt number for this transaction is **7524681355**

The following is a summary of the transaction which you have just submitted. We recommend that you print out this summary as a record of the transaction.

These are the details of your transaction for:

New client

TFN: 917977541

Name: The Trustee for IS & AM Petherick

Add new authorisation to Income Tax Payer

New postal address

No change requested

Add new authorisation to Activity Stmtnt

New postal address

No change requested

Activity statement delivery preference

Receive activity statement via ELS: No

PO BOX 9990
Chermside QLD 4032

5,119
09



Australian Government
Australian Taxation Office



THE TRUSTEE FOR IS & AM PETHERICK
SUPERANNUATION FUND
PO BOX 583
BUNDABERG QLD 4670

Date of Issue
2 AUG 10

TAX FILE NUMBER ADVICE

Your tax file number (TFN) is:

917 977 541

Keep this notice in a safe place for further reference.

This TFN has been issued either in response to your recent application/enquiry, or at the discretion of the Commissioner of Taxation.

Under the law the Commissioner may issue a TFN as necessary, even if you did not apply for one. This only occurs after we have conducted a comprehensive search of our records and were unable to establish that any TFN belonged to you.

While our TFN searches are comprehensive, we appreciate that you may already have a TFN. If you do already have a TFN please call us on 13 28 66 between 8am and 6pm Monday to Friday so that we may amend our records.

Yours sincerely

Paul Duffus
Deputy Commissioner of Taxation

NOTICE OF CONSENT TO ACT AS TRUSTEE
FOR IS & AM Petherick Superannuation Fund

I confirm and understand the strict eligibility requirements for individuals who act as Trustee(s) of superannuation entities under the Superannuation Industry (Supervision) Legislation ("SIS") and in regard I am not a "disqualified person" under SIS as:

- ◆ I have not at any time been convicted of an offence in respect of dishonest conduct;
- ◆ I have not at any time been the subject of a civil penalty order under SIS;
- ◆ I am not an undischarged bankrupt;
- ◆ My property is not subject to control in a bankruptcy context by any person;
- ◆ During the last 3 years I have not entered into any assignment, arrangement or composition with my creditors under any law.

I will immediately notify my fellow Trustee(s) if at any time during which I am a responsible officer of that body any of the above statements cease to apply to me.


Alison Marjorie Petherick

Dated 12th July 2010

NOTICE OF CONSENT TO ACT AS TRUSTEE
FOR IS & AM Petherick Superannuation Fund

I confirm and understand the strict eligibility requirements for individuals who act as Trustee(s) of superannuation entities under the Superannuation Industry (Supervision) Legislation ("SIS") and in regard I am not a "disqualified person" under SIS as:

- ◆ I have not at any time been convicted of an offence in respect of dishonest conduct;
- ◆ I have not at any time been the subject of a civil penalty order under SIS;
- ◆ I am not an undischarged bankrupt;
- ◆ My property is not subject to control in a bankruptcy context by any person;
- ◆ During the last 3 years I have not entered into any assignment, arrangement or composition with my creditors under any law.

I will immediately notify my fellow Trustee(s) if at any time during which I am a responsible officer of that body any of the above statements cease to apply to me.


Ian Stanley Petherick

Dated 12th July 2010