

# Self-Managed Super Fund Audit Request



Name of Fund: NBEL Superannuation Fund  
 Fund ABN: 18517339335  
 Accountant / Administrator: **Sue Lawson**  
 Email: **sue@cleave.com.au** Phone: **(07) 3359 3311**  
 Address: **PO Box 165, Virginia QLD 4014**

Audit Period: **Financial Year Ended 30 June 2019**

Are all members either directors of the Trustee Company or trustees of the fund? Yes / No

Have there been any known breaches of the SIS Act during the audit period? Yes / No

Notes: \_\_\_\_\_

Does the fund have any "in house"/related party assets? Yes / No

If yes are the assets pre-99? Yes / No

Notes: \_\_\_\_\_

## Financial Audit

YES	NO	N/A	Notes	S/R
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Statements.pdf	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Statements.pdf	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Statements.pdf	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Statements.pdf	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Data File	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Data File <i>lates notice</i>	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Financial Statements.pdf	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	

## Compliance Audit

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Data File	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Data File	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Statements.pdf	Y
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Data File	

## Pension / Benefits YES / NO - N/A

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Statements pff	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	

## Signed Documents (Returned to Auditor)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Statements.pdf	Y
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Statements.pdf	Y
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Other: \_\_\_\_\_