

**BINDING DEATH BENEFIT NOMINATION**

To the Trustee of the Esther Ruberl Superannuation Fund

I Ian Alexander Moffatt of 3 Wagenah Avenue Victor Harbor SA 5211 being a member of Esther Ruberl Superannuation Fund ('the Fund'), hereby give notice that upon my death the Trustee of the Fund is required (and this nomination shall be binding on the Trustee) to pay my benefits in the Fund to the following persons, being my dependants and/or my personal legal representative, in the proportions specified in relation to each person nominated<sup>2</sup>.

Esther Mercedes Ruberl of 3 Wagenah Avenue Victor Harbor SA 5211 100% of my pension account

My personal legal representative

100% of the balance

(Insert here the names and addresses of the person/s so nominated)

(Insert here in relation to each person so nominated the proportion of your benefits which the Trustee is required to pay such person.)

I acknowledge that:

(a) I may amend or revoke this notice by giving to the Trustee a written notice signed in the presence of two adult witnesses.

(b) The Trustee of the Fund **will not** be required to pay my benefits in the Fund in accordance with this notice if, at the time of my death:

- (i) paying my benefits in accordance with this notice will be contrary to Superannuation Law; or
- (ii) any person nominated in this notice is not a 'Dependant' (as defined in the Trust Deed of the Fund) of mine or has predeceased me; or
- (iii) I am divorced from any Spouse of mine nominated in this notice, or I am no longer residing with any such Spouse (other than as a result of either or both of us suffering from a physical, intellectual or psychiatric disability); or
- (iv) I have amended or revoked this notice in writing in accordance with paragraph (a) above.

SIGNED<sup>2</sup> this 4<sup>th</sup> day of August in the year 2022

.....  
(Signature of member) I. A. Moffatt

*Alan*

*[Handwritten mark]*

This notice was signed by the Member in the presence of both of us<sup>1</sup> this

4th Day of August

in the year 2022

*Andrea M. Merylees*

*William Andrew Merylees*

Signature of Witness<sup>2</sup>

Signature of Witness<sup>2</sup>

ANDREA MARY MERYLEES

WILLIAM ANDREW MERYLEES

Full Name of Witness:

Full Name of Witness:

Address of Witness:

PO BOX 154  
VICTOR HARBOR 5211

Address of Witness:

PO BOX 154  
VICTOR HARBOR 5211

Occupation of Witness:

RETIRED

Occupation of Witness:

RETIRED

#### NOTES

1. This notice may only be used to require the Trustee to pay benefits to the dependants of the Member and/or legal personal representative of the Member.
2. The proportions of the Member's benefits to be paid to the persons nominated in this notice must be clearly specified.
3. This notice must be signed and dated by the member in presence of two witnesses.
4. The two witnesses must be both at least 18 years of age and neither of the two witnesses may be nominated as beneficiaries in this notice.
5. This notice must contain a declaration signed and dated by the witnesses stating that the notice was signed by the Member in their presence.
6. Making a nomination of beneficiary is optional.
7. If you decide to make a binding nomination it is important that you understand that the Trustee will be required to pay your Death Benefit in accordance with your nomination provided that the nomination remains valid.
8. You may nominate more than one person if you wish. In this case you will need to nominate the proportions in which the Benefit is to be paid.
9. Your nomination will cease to be effective if:
  - (a) you marry or are divorced after making your nomination;
  - (b) any of the nominated persons die;
  - (c) if any of the nominated persons are not your Dependants or legal representatives both at the time of the nomination being made and at the date of death.

If a binding nomination ceases to be effective for any of these reasons, you will be free to make another nomination but if you do not, then in the event of death the Trustee will

*[Handwritten mark]*

have discretion as to payment of your benefit as between your Dependents and legal representatives.

10. You can nominate a Dependant person falling within the definition of Dependant including:
- (a) a spouse including a person who lives with you on a bona fide domestic basis as your husband or wife; or
  - (b) any child of yours including any adopted child, step-child or ex-nuptial child;
  - (c) any who with whom you have an interdependency relationship at the relevant date; and
  - (d) any other person who you consider to be financially dependent upon you.

Your legal representative/s will be the executors of your Will.

11. The witnesses to your nomination must have a full legal capacity and cannot be a nominated beneficiary.

