# VHS Superannuation Fund General Ledger Account Movement For the period from 1 July 2021 to 30 June 2022 Description Quantity Debits Credits Balance

#### Expenses

Date

#### Insurance Premiums - Mr Ross Hyde-Smith

Accum	ulation		
01/07/2021	Opening Balance		0.00
15/07/2021	AMP LIFE LIMITED A2006249-H	952.01	952.01 DR
16/08/2021	AMP LIFE LIMITED A2006249-H	952.01	1,904.02 DR
15/09/2021	AMP LIFE LIMITED A2006249-H	952.01	2,856.03 DR
15/10/2021	AMP LIFE LIMITED A2006249-H	952.01	3,808.04 DR
15/11/2021	AMP LIFE LIMITED A2006249-H	540.25	4,348.29 DR
15/12/2021	AMP LIFE LIMITED A2006249-H	661.32	5,009.61 DR
17/01/2022	AMP LIFE LIMITED A2006249-H	661.32	5,670.93 DR
15/02/2022	AMP LIFE LIMITED A2006249-H	661.32	6,332.25 DR
15/03/2022	AMP LIFE LIMITED A2006249-H	661.32	6,993.57 DR
19/04/2022	AMP LIFE LIMITED A2006249-H	661.32	7,654.89 DR
16/05/2022	AMP LIFE LIMITED A2006249-H	661.32	8,316.21 DR
15/06/2022	Resolution Life A2006249-H	661.32	8,977.53 DR
30/06/2022	Closing Balance		8,977.53 DR



## **Transaction history from 01 July 2020 to 30 June 2021** Flexible Lifetime<sup>®</sup> – Protection Plan

Plan number		NT5216521Y	
Plan owner(s)	er(s) V HYDE-SMITH PTY LTD ATF VHS SF		
Insured person(s)		Ross Ross	
Date received	Due date	Transaction	Amount \$
15/07/2020	15/07/2020	Premium	777.87
17/08/2020	15/08/2020	Premium	777.87
15/09/2020	15/09/2020	Premium	777.87
15/10/2020	15/10/2020	Premium	777.87
16/11/2020	15/11/2020	Premium	777.87
15/12/2020	15/12/2020	Premium	952.01
17/01/2021	15/01/2021	Premium	952.01
15/02/2021	15/02/2021	Premium	952.01
15/03/2021	15/03/2021	Premium	952.01
15/04/2021	15/04/2021	Premium	952.01
17/05/2021	15/05/2021	Premium	952.01
15/06/2021	15/06/2021	Premium	952.01

#### AMP Life

#### We completed your alteration request

CUSTOMER NAME V Hyde-Smith Pty LTD Atf Vhs Sf

ACCOUNT NO NT5216521Y

AMP

#### REQUEST ID 7000458848

#### Flexible Lifetime® – Protection Plan

Dear Directors,

We have altered your plan as requested. The enclosed Memorandum of Alteration confirms these changes.

#### **The Memorandum of Alteration**

Please keep your Memorandum of Alteration with your Certificate of Insurance and Plan Rules for future reference as it forms part of your contract with us.

If any details are incorrect, please inform us as soon as possible.

#### Your premium

Your new Monthly premium of \$540.25 will be deducted from your nominated account. The plan is renewed until 15 November 2021.

Please be advised your premium may change on 15 December 2021, due to your plan anniversary date the new monthly premium of \$661.32 will apply.

#### Your refund

We have refunded \$411.76 to your bank account. **We're here to help** Thank you for choosing us to meet your financial needs. If you have any questions, please contact us.

#### Your contacts

W amplife.com.au

E askamplife@amplife.com.au T 133 731

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You have previously been informed about 'The Duty to Take Reasonable Care Not to Make a Misrepresentation' that applies in relation to a life insurance contract.

#### AMP

It is important to remember that you must take reasonable care not to make a misrepresentation. A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth. Please ensure you answer every question truthfully, accurately and completely. Where a policy owned by one person covers the life of another person, it's important that the other person does not make a misrepresentation when providing information to the insurer. If the other person does make a misrepresentation, then it may be treated as a failure by the owner of the policy in their Duty to Take Reasonable Care Not to Make a Misrepresentation. Therefore, you must take reasonable care not to make a misrepresentation whether you're the owner of the policy or an insured person under it. If, after the cover starts, you think you may not have met your duty, please contact us immediately.



### **Memorandum of Alteration**

#### Effective Date: 15 October 2021

This Memorandum of Alteration forms part of your plan. Please attach this Memorandum to your Certificate and Plan Rules, and keep it in a safe place, with any previous Increases, Schedules or Memorandums of Alteration. The details in this Memorandum will replace corresponding details shown on any previous Schedule or Memorandum of Alteration.

#### **Plan details**

Plan owner	V Hyde-Smith Pvt LTD Atf Vhs Sf	
Plan name	Flexible Lifetime® – Protection Plan	
Plan number	NT5216521Y	
Insured person(s)	Ross Henry Hyde-Smith	
Table	CCI	
-New South Wal		
Class of business	Ordinary	

#### Benefits

Insured Person(s)	Date of Birth	Benefit	Insured Amount \$	CPI
Ross Henry Hyde-Smith	21/04/1965	Death Benefit	650,000.00	Y
	Total and Perm	anent Disablement Benefit	650,000.00	Y

• The premium includes stamp duty if applicable

#### Premium

Premium amount	
Includes stamp duty	\$14.62
Consumer Price Indexation (CPI)	Y

- The premium including stamp duty if applicable (see Schedule and Clause 2) will, from the effective date, be based on the benefits applying for each of the insured persons under this plan. We generally apply increases to your premium each year on your plan anniversary. However, the total amount you are required to pay may change between anniversaries as a result of you increasing the amount of insurance on your plan and / or due to changes in the stamp duty amount payable.
- Stamp duty is a State/Territory Government levy payable on certain types of insurance cover and may be included within your insurance premium or be an additional amount payable. If the stamp duty amount is an additional amount, it will be shown separately on your next statement. Stamp duty may vary due to changes imposed by the State/Territory Revenue Office, or if you change State/Territory. Please inform us of any corrections or changes to the insured person's address.

Signed at Sydney on 11/11/2021
S.V.P
Steve Vaid Director Client Services