

# WILLIS FUND

## Individual Trustee Declarations

I make the following declarations:

- I have not been convicted of an offence against or arising out of a law of the Commonwealth, a State, a Territory or a foreign country, being an offence in respect of dishonest conduct.
- I have not had a civil penalty order made against me under the *Superannuation Industry (Supervision) Act 1993*.
- I am not an insolvent under administration.
- I have not been disqualified under section 120A of the *Superannuation Industry (Supervision) Act 1993*.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
  
STACEY WILLIS  
Trustee

# WILLIS FUND

## Individual Trustee Declarations

I make the following declarations:

- I have not been convicted of an offence against or arising out of a law of the Commonwealth, a State, a Territory or a foreign country, being an offence in respect of dishonest conduct.
- I have not had a civil penalty order made against me under the *Superannuation Industry (Supervision) Act 1993*.
- I am not an insolvent under administration.
- I have not been disqualified under section 120A of the *Superannuation Industry (Supervision) Act 1993*.

Date: \_\_\_\_\_

Signed:  \_\_\_\_\_  
PRISCILLA WILLIS  
Trustee

# WILLIS FUND

## Consent to Appointment as Trustee

I consent to being appointed a trustee of the WILLIS FUND.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
STACEY WILLIS

A handwritten signature in black ink, appearing to read 'Stacey Willis', is written over a horizontal line. The signature is stylized and cursive.

# WILLIS FUND

## Consent to Appointment as Trustee

I consent to being appointed a trustee of the WILLIS FUND.

Date: \_\_\_\_\_

Signed:  \_\_\_\_\_  
PRISCILLA WILLIS

.

## Application to become a Member

This Application Form contains your Death Benefit Nomination and undertakings which must be made by you. It is also accompanied by the Product Disclosure Statement relevant to the fund contained in Annexure A.

### Part 1 Application and undertakings

- I apply to become an initial member of this fund under the trust deed.
- I make each of the following undertakings:
  - I am not in an employment relationship with another member.
  - I am not a disqualified person under superannuation law from being a trustee of the fund.
  - I will comply with the trust deed.
  - Upon request, I will fully disclose in writing any information required by the trustee in respect of my membership of the fund. This includes disclosing:
    - Any circumstance which may lead to my entering into an employment relationship with any other member of the fund who is not also a relative of mine.
    - That I may become disqualified under superannuation law from being a trustee of the fund.
    - Any information in relation to my medical condition.
- I will act as a trustee of the fund.
- I understand the trust deed, particularly its terms concerning the benefits payable under it, and I have read and understood the attached Product Disclosure Statement, annexed and marked 'A'.
- I have read and understand the prescribed information relating to the collection of Tax File Numbers by the trustees of superannuation funds.

I attach a completed ATO Individual Tax File Number Notification form.

Applicant name	STACEY WILLIS
Applicant address	188 QUARRY ROAD, BOSSLEY PARK 2 2176
Applicant occupation	LANDSCAPING
Date of birth	06 April 1977
Applicant place of birth	NEW ZEALAND

## **Part 2 Death benefit arrangements**

This part of the member's application form is blank because the member elected to 'do nothing'. When they are ready, the member can consider the matters below when they decide on their death benefit arrangements.

At that time, the member;

- could prepare the relevant documents using the relevant pro-forma in the schedules to the Fund's deed (if they're comfortable doing so); or
- could order those documents from the person or organisation who arranged this document for them.

### **First Notice: The types of death benefit arrangements and the order in which they take effect**

The Fund's Deed allows three types of death benefit payment arrangements. They, and the order in which they take effect, are as follows:

- a ***death benefit agreement*** — which binds the trustee and which does not expire, see Part H of the Deed;
- ***binding death benefit notices or binding nomination forms*** — which bind the trustee but which expire after 3 years or earlier if replaced or revoked; and
- ***non-binding nomination forms*** — which do not bind the trustee but which do not expire until replaced or revoked.

***Death benefit agreements take priority over binding death benefit notices and non-binding nomination forms.***

### **What you need to consider**

When you, as a member, are considering signing a binding death benefit notice or a non-binding nomination form it is important to consider that:

- a death benefit agreement takes priority over any binding death benefit notice or any non-binding nomination form;
- to the extent permitted by superannuation law, the trustee must pay or apply the relevant benefit in accordance with the death benefit agreement. Therefore if you sign a binding death benefit notice or a non-binding nomination form, then they will have no effect on any earlier or later death benefit agreement that you sign; and
- if any part of a death benefit agreement is invalid, then the trustee (as required by the Fund's Deed) will pay or apply the "invalid" part of the death benefit in accordance with any binding death benefit notice, or by reference to any non-binding nomination form, you have signed.

### **Second Notice: Consistency of death benefit arrangements with pension terms**

It is important to consider how any death benefit nomination or death benefit agreement interacts with the arrangements for payment of a pension to a reversionary beneficiary. The terms of the pension, and the terms of the death benefit nomination or death benefit agreement should be considered together.

For instance, if the pension terms require an automatic reversionary pension, then the death benefit nomination or death benefit agreement has no effect in relation to that pension. If the member wants to ensure all these arrangements – under pension terms, a death benefit nomination or death benefit agreement – are consistent, or to deliberately vary from one to the other, then careful drafting is required and the member should seek professional advice.

**Part 3 Provision of member's tax file number to regulated superannuation fund**

To the trustees of the WILLIS FUND.

I have been informed of the reasons why my TFN is sought by the fund.

My TFN is 390025900.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
STACEY WILLIS

A handwritten signature in black ink, appearing to read 'Stacey Willis', is written over a horizontal line. The signature is cursive and somewhat stylized.



## Important information about providing your tax file number (TFN) to the fund

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Under the *Superannuation Industry (Supervision) Act 1993*, the fund is required to request your TFN. Your TFN is confidential: you don't have to provide it.

### What your TFN may be used for

If you provide your TFN, it **will be used for legal purposes only**. The purposes for which your TFN may be used may change in the future. At present, they include:

- searching for other benefits that may exist for you in the fund;
- calculating reduced tax rates on eligible termination payments (ETPS) when benefits are paid;
- reporting payments to ATO for reasonable benefit limits (RBL) purposes;
- reporting contributions to ATO for contributions tax (surcharge) purposes which may not otherwise be subject to the surcharge;
- passing to other regulated superannuation fund, ADFs and RSAs if your benefits are rolled over. You may revoke this authority later in writing;
- passing on with other details if you become lost and your benefits are paid to the ATO as unclaimed money.

### What might happen if you don't provide your TFN

If you do not provide your TFN, the following may happen:

- other benefits existing for you in the fund may be more difficult to locate and amalgamate;
- higher tax rates may apply to ETPs paid to you. (This may be recovered with lodgement of your next income tax return);
- your benefits may be subject to an extra 15% contribution tax (surcharge). This may be reclaimed on application to the ATO;
- your TFN will not be passed to other regulated superannuation funds, ADFs and RSAs if your benefits are rolled over;

your benefits may be more difficult to locate if benefits are paid to the ATO as unclaimed money.

Annexure A

## Product Disclosure Statement

### WILLIS FUND

STACEY WILLIS

188 QUARRY ROAD

BOSSLEY PARK, NSW, 2176

*Here you need to attach a copy of the Product Disclosure Statement in Schedule 6 to the Deed.*

## Application to become a Member

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  - I will comply with the trust deed.
  - Upon request, I will fully disclose in writing any information required by the trustee in respect of my membership of the fund. This includes disclosing:
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    - That I may become disqualified under superannuation law from being a trustee of the fund.
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I attach a completed ATO Individual Tax File Number Notification form.

Applicant name	PRISCILLA WILLIS
Applicant address	188 QUARRY ROAD, BOSSLEY PARK 2 2176
Applicant occupation	OFFICE WORKER
Date of birth	06 April 1977
Applicant place of birth	AUCKLAND

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**Part 3 Provision of member's tax file number to regulated superannuation fund**

To the trustees of the WILLIS FUND.

I have been informed of the reasons why my TFN is sought by the fund.

My TFN is 200265967.

Date: \_\_\_\_\_

Signed:  \_\_\_\_\_  
PRISCILLA WILLIS

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- your benefits may be subject to an extra 15% contribution tax (surcharge). This may be reclaimed on application to the ATO;
- your TFN will not be passed to other regulated superannuation funds, ADFs and RSAs if your benefits are rolled over;

your benefits may be more difficult to locate if benefits are paid to the ATO as unclaimed money.

Annexure A

## Product Disclosure Statement

### WILLIS FUND

PRISCILLA WILLIS  
188 QUARRY ROAD  
BOSSLEY PARK, NSW, 2176

*Here you need to attach a copy of the Product Disclosure Statement in Schedule 6 to the Deed.*



# WILLIS FUND

## Instructions for use of Certificate of Compliance

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**Used when the member “rolls over” (transfers) benefits from another fund to the WILLIS FUND.**

### **What is the certificate for?**

If a member transfers money from another super fund into the member’s SMSF, then the other fund may require one of these certificates.

### **What is certified?**

By signing the Certificate the trustee(s) of the Fund certifies that:

- 1 It is a regulated superannuation fund under the SIS Act;
- 2 It is a complying superannuation fund under the SIS Act;
- 3 It is not subject to a direction under Section 63 of the SIS Act; and
- 4 Its trust deed permits the receipt of rolled over or transferred benefits.

### **What should the trustee do before signing?**

**IMPORTANT:** Before the fund's trustee(s) sign the certificate they must make sure that:

- items 1-4 above are true; and
- the Fund must both have chosen to be regulated by the Australian Taxation Office (ATO) and have told the ATO of that choice — which the Fund does on the form used to apply for an ABN (Australian Business Number).

## WILLIS FUND (Fund)

To whom it may concern

### **Trustee Certificate of Compliance —**

**(This is not the “Notice of Compliance” that the Australian Taxation Office provides)**

**This Trustee’s Certificate of Compliance is to be used when the member “rolls over” (transfers) benefits from another fund to the WILLIS FUND.**

The Trustee(s) of the Fund certify/ies that the Fund:

- 1        Is a regulated superannuation fund under the *Superannuation Industry (Supervision Act) 1993 (SIS Act)*.
- 2        Is a complying superannuation fund within the meaning of section 42A of the SIS Act.
- 3        Is not subject to a direction under Section 63 of the SIS Act and is therefore able to accept employer contributions.
- 4        Is empowered by the Fund's trust deed to receive rolled over or transferred benefits.
- 5        Has received consent to the rollover from the relevant member, as set out below, in accordance with r6.28(i)(b) of the *Superannuation Industry (Supervision) Regulations 1994*.

Signed for and on behalf of the Trustee(s):

Signature of Trustee:

\_\_\_\_\_

Name:

\_\_\_\_\_

Date:

\_\_\_\_\_

### **Member’s Consent to the “rollover”**

I, \_\_\_\_\_ (member name), by signing this form, consent to the rollover of my benefits into the **WILLIS FUND**.

Signature of Member:

\_\_\_\_\_

Date:

\_\_\_\_\_