

CONSENT TO ACT AS TRUSTEE

Pursuant to Section 118 of the Superannuation Industry (Supervision) Act 1993

We, **FRANK & PAMELA NEEDS**

of 34 BURRAINEER AVE ST IVES NSW 2075

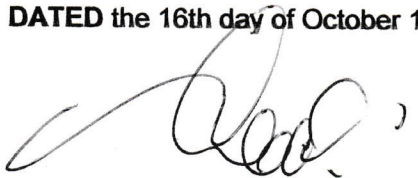
HEREBY DECLARE that I/we are not *disqualified from acting as trustee(s) of a superannuation fund under the Superannuation Industry (Supervision) Act 1993.

AND HEREBY CONSENT to act as Trustee(s) of MINIMI SUPERANNUATION FUND constituted on the 16th day of October 1996.

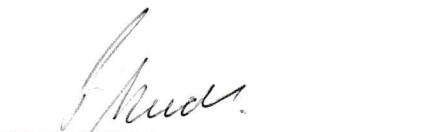
AND I/WE AGREE to execute the Trust Deed and to administer the Fund in accordance with the terms and conditions set out in the Trust Deed.

I/WE UNDERTAKE to notify any other Trustee of the Fund and APRA / ATO in writing if we are for any reason disqualified from continuing to act as a trustee.

DATED the 16th day of October 1996



FRANK NEEDS
Trustee



PAMELA NEEDS
Trustee

* **Note re: disqualification:**

The Superannuation Industry (Supervision) Act 1993 provides that the following persons are disqualified from acting as a trustee:

1. Persons who have prior convictions involving dishonest conduct, wherever or whenever such conviction may have occurred.
2. Persons who are insolvent, bankrupt, or have entered into arrangements, assignments or compositions with creditors under Part X of the Bankruptcy Act 1966 (Cth) or a similar foreign law.
3. Persons in relation to whom a civil penalty order has been made under the Superannuation Industry (Supervision) Act 1993.

MEMBER APPLICATION

MINIM SUPERANNUATION FUND

Application for membership

Confidential

The Trustee

I, FRANK NEEDS

of 34 BURRANEIER AVE ST IVES NSW

hereby declare that I have received sufficient information from the Trustees to enable me to make an informed decision about joining the fund.

I, hereby apply to join the MINIM SUPERANNUATION FUND (the Fund) and I hereby authorise my employer to make any contributions as and when due, in accordance with the Trust Deed of the Fund.

I also agree and undertake the following:

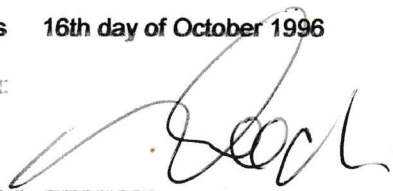
- (a) I will be bound by the Trust Deed governing the Fund as it is or may be varied from time to time.
- (b) I understand the terms and conditions of the Trust Deed, especially those concerning benefits payable.
- (c) I consent to act as Trustee of the Fund for the purposes of complying with the self managed super fund requirements.
- (d) I will upon request make full disclosure in writing of any benefits I have received, may receive or may be entitled to receive from any other superannuation fund, approved deposit fund, rollover annuity or employer.
- (e) I will notify the Trustee at any time I cease to be gainfully employed as defined in the Trust Deed.
- (f) I consent to the Trustee acting as Trustee of the Fund.
- (g) I declare that the information completed below regarding nominated dependants (if any) is accurate in every respect.
- (h) I declare that in completing this application I was given advice in writing regarding the benefits I would be entitled to in joining the fund, the method of determining that entitlement and the conditions relating to those benefits.
- (i) I declare that I have been provided with a copy of the most recent report to members and details of fund earnings rates to the membership class which I belong.

I am aware that in the event of my death while a member of the Fund the benefit provided under the Deed is payable at the Trustee's discretion to one or more of my dependants, or where I have no dependants, to my estate.

In such an event, it is my wish that the benefit be paid to the persons nominated below in the proportions shown:

Dated this 16th day of October 1996

Signature:



Date of birth: 7/09/1935

MEMBER APPLICATION

MINIM SUPERANNUATION FUND

Application for membership

Confidential

The Trustee

I, **PAMELA NEEDS**

of **34 BURRANEER AVE ST IVES NSW**

hereby declare that I have received sufficient information from the Trustees to enable me to make an informed decision about joining the fund.

I, hereby apply to join the MINIM SUPERANNUATION FUND (the Fund) and I hereby authorise my employer to make any contributions as and when due, in accordance with the Trust Deed of the Fund.

I also agree and undertake the following:

- (a) I will be bound by the Trust Deed governing the Fund as it is or may be varied from time to time.
- (b) I understand the terms and conditions of the Trust Deed, especially those concerning benefits payable.
- (c) I consent to act as Trustee of the Fund for the purposes of complying with the self managed super fund requirements.
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I am aware that in the event of my death while a member of the Fund the benefit provided under the Deed is payable at the Trustee's discretion to one or more of my dependants, or where I have no dependants, to my estate.

In such an event, it is my wish that the benefit be paid to the persons nominated below in the proportions shown:

Dated this **16th day of October 1996**

Signature:



Date of birth: **11/12/1942**