

SCHEDULE B  
APPLICATION FOR MEMBERSHIP  
CONFIDENTIAL

To: The Trustee  
The HUNTER FAMILY SUPERANNUATION FUND  
710 JARRAH ROAD  
MUNMARING WA 6073


Re: Membership

I, the undersigned person, being eligible hereby apply for admission to membership of the Fund.

I agree and undertake as follows:

- (1) I will be bound by the Trust Deed governing the Fund as it is or may be by variation from time to time.
- (2) I will make a full disclosure in writing of any benefits I may receive or be entitled to receive from any other Superannuation Fund, Approved Deposit Fund or Roll over Annuity.
- (3) I understand the terms and conditions of the Trust Deed and more particularly the terms and conditions of the Deed concerning benefits payable and I acknowledge I have been informed of my rights and the rights of my Dependants pursuant to the Deed.
- (4) I consent to the Trustee acting as Trustee of the Fund.

I declare that the rights held by me and the amounts received by me from any superannuation fund, pension fund, Approved Deposit Fund or Annuity are set out in the Attachment.

Dated the 10<sup>th</sup> day of AUGUST 2016  
 Signature :   
 Name, Occupation : BRUCE HUNTER  
 Address : 710 JARRAH RD, MUNMARING WA 6073  
 Date of Birth : 17-10-1966  
 Tax File No : 629 984 898

NOMINATED DEPENDANT(S)

I nominate the undermentioned persons as my Nominated Dependants:

SURNAME(S)	GIVEN NAME(S)	RELATIONSHIP	% OF TOTAL BENEFIT
HUNTER	JACQUINE J	WIFE	100%

SCHEDULE B  
APPLICATION FOR MEMBERSHIP  
CONFIDENTIAL

To: The Trustee  
The HUNTER FAMILY SUPERANNUATION FUND  
710 JAREAH ROAD  
MUNDAGUNO WA 6073

Re: Membership

I, the undersigned person, being eligible hereby apply for admission to membership of the Fund.

I agree and undertake as follows:

- (1) I will be bound by the Trust Deed governing the Fund as it is or may be by variation from time to time.
- (2) I will make a full disclosure in writing of any benefits I may receive or be entitled to receive from any other Superannuation Fund, Approved Deposit Fund or Roll over Annuity.
- (3) I understand the terms and conditions of the Trust Deed and more particularly the terms and conditions of the Deed concerning benefits payable and I acknowledge I have been informed of my rights and the rights of my Dependants pursuant to the Deed.
- (4) I consent to the Trustee acting as Trustee of the Fund.

I declare that the rights held by me and the amounts received by me from any superannuation fund, pension fund, Approved Deposit Fund or Annuity are set out in the Attachment.

Dated the 10<sup>th</sup> day of AUGUST 2010.

Signature JT X 

Name, Occupation : JACQUELINE TRACEY HUNTER

Address : 710 JAREAH RD MUNDAGUNO WA 6073

Date of Birth : 26-1-1965

Tax File No : 157 582 028

NOMINATED DEPENDANT(S)

I nominate the undermentioned persons as my Nominated Dependants:

SURNAME(S)	GIVEN NAME(S)	RELATIONSHIP	% OF TOTAL BENEFIT
HUNTER	BRUCE	HUSBAND	100%