APPLICATION FOR MEMBERSHIP

OF THE

LATTO SUPER FUND

Full Name: SHARYN DEBRA LATTO

Address: 21 WARRIGAL STREET PARA HILLS SA 5096

Date of Birth: 8/2/1969 Sex: Female

I hereby apply to become a member in category ordinary of the abovementioned Fund which is administered in terms of a Trust Deed dated the

I have been advised of the benefits which I am entitled to receive from the Fund on retirement, death or termination of service with my Employer.

In consideration of my admission to membership, I hereby agree to abide by and be bound by the provisions of the abovementioned Trust Deed and I declare I am not entitled to a deferred annuity and I am not a member of any other superannuation fund or approved deposit fund nor have I received benefits from any such fund, other than the following:-

* I hereby authorise my current Employer to deduct from my salary such amounts (if any) as are from time to time agreed upon by myself and my employer as contributions to be made by me to the abovementioned Fund.

NOMINATION OF BENEFICIARIES

Whilst I acknowledge the discretion the Trustees have to determine who the benefit is paid to, I hereby nominate the following persons to receive the benefit payable by the Trustees of the fund in the event of my death:

Name and Address	Relationship to member	Proportion of benefit
PAUL LATTO 21 WARRIGAL ST PARA HILLS 5096	HUSBAND	100 %
		%

Dated this

Signature of Applicant:

Witness:

JAMES DAVID LATTO.

_____THE LATTO SUPERANNUATION FUND_____

MEMBER ACCOUNT DETAILS

NAME: SHARYN DEBRA LATTO

DATE OF BIRTH: 8/2/1969

DATE JOINED FUND: 1ST SEPTEMBER 2010

ELIGIBLE SERVICE PERIOD: DATE STARTED: 1ST SEPTEMBER 2010

YEAR ENDED 30/6	YEAR'S CONTRIBUTIONS &/OR TRANSFERS	UNDEDUCTED CONTRIBUTIONS & POST 6/94 INVALIDITY AMOUNTS	PRE 7/94 CONCESSIONAL AMOUNTS	TAXABLE CONTRIBUTIONS PLUS NET EARNINGS	TOTAL ACCOUNT BALANCE

_____THE LATTO SUPERANNUATION FUND_____

MEMBER ACCOUNT DETAILS

RBL BALANCES

NAME:

YEAR ENDED 30/6	NON RBL AMOUNT	NON RBL BALANCE	RBL AMOUNT	RBL BALANCE