

SCHEDULE B  
APPLICATION FOR MEMBERSHIP  
CONFIDENTIAL

To: The Trustee

THE CS + AM BUTCHER SUPERANNUATION FUND  
P. O. Box 19  
Brookton WA 6306

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 21<sup>st</sup> day of March 2007.

Signature : Anna Marie Butcher X-AM

Name, Occupation : ANNA MARIE BUTCHER

Address : LOCKLEA CORBERDING ROAD BROOKTON WA 6306

Date of Birth : 5-10-1957

Tax File No : 621 492 082

NOMINATED DEPENDANT(S)

I nominate the undermentioned persons as my Nominated Dependants:

			% OF TOTAL
SURNAME(S)	GIVEN NAME(S)	RELATIONSHIP	BENEFIT
BUTCHER	COLIN JAMES	HUSBAND	100
.....	.....	.....	.....
.....	.....	.....	.....

SCHEDULE B  
APPLICATION FOR MEMBERSHIP  
CONFIDENTIAL

To: The Trustee

THE CJ + AM BUTCHER SUPERANNUATION FUND  
P.O. BOX 19  
BROOKTON WA 6306

Re: Membership

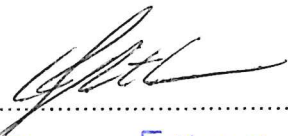
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Dated the 21<sup>st</sup> day of MARCH 2007.

Signature :  X CJ

Name, Occupation : COLIN JAMES BUTCHER - Farmer

Address : ROCKLEA CORBERDING ROAD BROOKTON WA 6306

Date of Birth : 20-3-1956

Tax File No : 621 635 615

NOMINATED DEPENDANT(S)

I nominate the undermentioned persons as my Nominated Dependants:

			% OF TOTAL
SURNAME(S)	GIVEN NAME(S)	RELATIONSHIP	BENEFIT
BUTCHER	ANNA MAUE	WIFE	100
.....	.....	.....	.....
.....	.....	.....	.....