## NEW SMSF TRUSTEE INFORMATION FORM

Please ensure all information provided is **true and accurate**, and appointed officeholders and members have consented to the appointments.

**Client Name** 

Samuel Manins

Date

5/12/2021

## SUPER FUND DETAILS

**Super Fund Name:** 

SM Oz Super

## TRUSTEE COMPANY DETAILS Company Name - 1st choice: SM Oz Boss Company Name - 2nd choice SJM Oz Boss NSW State / Territory to be registered in Is the proposed Company Name an No existing business name? Has this company name been reserved No with an ASIC Form 410? **Company Name Reserved** n/a **Individuals Full Name** n/a on Reservation Type of Company being registered Propriety Limited Superannuation Trustee Governed by A Constitution (if a Super Trustee or Public Company, it must have a Constitution)

17/26-28 Octal St Yatala QLD 4207
No – It's a serviced mail system
SOS Mail Solutions
Yes – I have an existing service with them
17/26-28 Octal St Yatala QLD 4207

OFFICER & MEMBER DETAILS - You can appoint a maximum of 4				
Surname	Manins	D.O.B.	19 November 1978	
First Name	Samuel	City/Town of Birth	Otaki	
Middle Names	James	State of Birth		
Gender	Male	Country of Birth	New Zealand	
Residential Address	17 Cecilia Street Hamlyn Terrace NSW 2259			
Email Address (must have)	maninss@gmail.com	TFN	393796011	
Role to be held Director Secretary and Shareholder/Member of the Fund – All roles				
Class & No. of Shares to be held One (1) ORDINARY				

OFFICER & MEMBER DETAILS	
Surname	D.O.B.
First Name	City/Town of Birth
Middle Names	State of Birth

Gender	O Male O Female	Country of Birth			
Residential Address					
Email Address (must have)		TFN			
Role to be held	O Director O Secretary <b>and</b> Shareholder/Me	ember of the Fund			
Class & No. of Shares to be	held One (1) ORDINARY				
OFFICER & MEMBER D	ETAILS – You can appoint a maximum	m of 4			
Surname		D.O.B.			
First Name		City/Town of Birth			
Middle Names		State of Birth			
Gender	O Male O Female	Country of Birth			
Residential Address					
Email Address (must have)		TFN			
Role to be held	O Director O Secretary and Shareholder/Mer	mber of the Fund			
Class & No. of Shares to be held One (1) ORDINARY					
OFFICER & MEMBER DE	TAILS – You can appoint a maximum	of 4			
Surname		D.O.B.			
First Name		City/Town of Birth			
Middle Names		State of Birth			
Gender	O Male O Female	Country of Birth			
Residential Address					
Email Address (must have)		TFN			
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