Schedule 1

The MJ & DL Hewett Superannuation Fund

Application for Membership

- 1. I hereby apply for admission to the membership of the Fund.
- 2. I state I am eligible to be admitted as a member of the Fund and (if the Fund is a self managed fund) appointed a Trustee (or a director of a corporate Trustee).
- 3. I agree as follows:
 - (1) I will be bound by the Trust Deed governing the Fund as it is or may be varied from time to time.
 - (2) I understand the terms and the conditions of the Trust Deed, including the benefits payable, my rights and the rights of my Dependants.
 - (3) I consent to the Trustee acting as Trustee of the Fund.
 - (4) I agree and consent (if the Fund is a self Managed fund) to be appointed a Trustee or a director of the corporate Trustee and declare I am eligible to be so appointed pursuant to the law.
 - (5) I agree to give to the Trustee my details (including my Tax File Number) or obtain them from my Employer.
 - (6) I agree to give any other information the Trustee may require for the purposes of the Fund.

Dated the 24th day of May 2013.

Full Name:	Surname: Hewett
	Given Name(s): Murry John
Address:	18 Picaroon Place
	Port Mandurah, WA, 6210
Signature:	MHp Man Shiell.
Occupation:	1 / / / / / / / / / / / / / / / / / / /
Date of birth:	7 th January 1967
Tax File Number:	146 132 669

NOMINATED DEPENDANT(S)

I hereby nominate the undermentioned persons as my Nominated Dependants:

Surname	Given Name (s)	Relationship	% of Total Benefit
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Dated the 24th day of May 2013.

Full Name:	Surname: Hewett Given Name(s): Dianne Lorraine		
Address:	18 Picaroon Place Port Mandurah, WA, 6210		
Signature:	DHIP PROPERTY		
Occupation:			
Date of birth:	9 th October 1967		
Tax File Number:	630 355 817		

NOMINATED DEPENDANT(S)

I hereby nominate the undermentioned persons as my Nominated Dependants:

Surname	Given Name (s)	Relationship	% of Total Benefit
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