

APPLICATION FOR MEMBERSHIP

To the Trustee of the Fund J & C COOLEY PERSONAL SUPERANNUATION FUND.

From: JOHN COOLEY of "KENILWORTH", WOODSTOCK, NSW 2793.

I apply to become a member of the abovementioned superannuation fund on the terms and conditions specified in the Trust Deed from the time being governing the Fund.

I understand that my employer will deduct from my salary such amounts as are required to provide my contributions to the Fund and will pay those amounts to the Trustee of the Fund.

I acknowledge my acceptance of
J.W. COOLEY & SON PTY. LTD. A.C.N. 000 610 588

as Trustee of the Fund.

Signature.....
John B. Cooley

JOHN COOLEY

Dated.....
29/6/98

NOMINATED BENEFICIARY *

I wish to advise the Trustee of the Fund that my Nominated Beneficiary(ies) under the Fund is/are as follows:

NAME IN FULL (DOB IF UNDER 18)	RELATIONSHIP TO MEMBER	FULL POSTAL ADDRESS	%SHARE OF BENEFIT **
CHRISTINE COOLEY	SPOUSE	KENILWORTH, WOODSTOCK NSW 2793	100%

I understand that the payment of any Death Benefit by the Fund will be at the absolute discretion of the Trustee and that this nomination is not to be treated as a direction.

Signature.....
John B. Cooley Dated.....
29-6-98

JOHN COOLEY

* Completion of this section is optional
** Show percentage of death benefits to be taken by each beneficiary.

APPLICATION FOR MEMBERSHIP

To the Trustee of the Fund J & C COOLEY PERSONAL SUPERANNUATION FUND.

From: CHRISTINE COOLEY of "KENILWORTH", WOODSTOCK, NSW 2793.

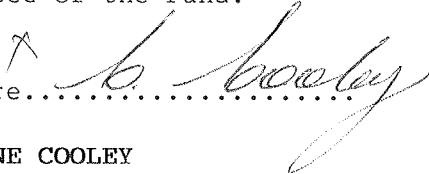
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Signature.....


CHRISTINE COOLEY

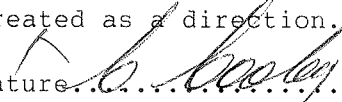
Dated.....
29-6-98

NOMINATED BENEFICIARY *

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NAME IN FULL (DOB IF UNDER 18)	RELATIONSHIP TO MEMBER	FULL POSTAL ADDRESS	%SHARE OF BENEFIT **
<i>JOHN COOLEY</i>	<i>SPOUSE</i>	<i>KENILWORTH, WOODSTOCK NSW 2793</i>	<i>100%</i>

I understand that the payment of any Death Benefit by the Fund will be at the absolute discretion of the Trustee and that this nomination is not to be treated as a direction.

Signature.....
 Dated.....
29-6-98

CHRISTINE COOLEY

* Completion of this section is optional

** Show percentage of death benefits to be taken by each beneficiary.