Mr P DiPietrantonio Quattro Superannuation Fund 16 Tangermere Place LILYDALE VIC 3140

# Tax Invoice 010951

Ref: QUASF01 18 June, 2018

Description	Amount
Fee for the preparation and lodgement of your income tax return for the year ended 30th June 2017.	
Fee for the preparation of your financial statements for the year ended 30th June 2017, for:	
Quattro Superannuation Fund	
and for annual minutes and distribution statements for the year ended 30th June 2017.	
Fee for the preparation and notification of Superannuation Contribution Information to the Australian Taxation Office for the year ended 30th June 2017.	
GST	1,120.00 112.00
Terms: Strictly 14 Days  Amount Due: \$	1,232.00

Please detach the portion below and forward with your payment

		KEII	mance Advice			
Quattro Superannua	ation Fund				Invoi	ce: 010951
Cash	Dir Debit	BSB:	083 125			QUASF01
		Account: Name:	54619 9306 SA Elliott		18	June, 2018
Cheque Visa	Mastercard	rvaine.	SA Ellion		Amount Due: \$	1,232.00
Card Number						
Security code (CCV		Expiry	Date	Signatı	ıre	

## SUPPORTING SCHEDULES TO THE STATEMENT OF ANNUAL TAXATION SUMMARY FOR THE YEAR ENDED 30 JUNE 2018

The following information regarding your investments is for reference only. Please be advised that the amounts have been included in the Annual Taxation Statement on Page 1, at the Questions indicated below.

Interest (Lehel dd C)	AMOUNT \$	TOTAL \$
Interest (Label 11-C) Cash Account Interest	261	261

#### **Shares**

Dividends (refer Dividend Income Schedule)

Gains/Losses from Realised Sale (refer Capital Gains/Losses Schedule)

Management and Other Expenses (charged to CASH Account)	
- Related to Trust Distribution (Label 12-I1)	1,533
- Related to Foreign Source Income (Label 11-D)	1,257
- Related to Interest Income (Label 12-I1)	91
- Related to Dividend Income (Label 12-I1)	2,383

ADDITIONAL INFORMATION

### Capital Gains - Australian/Foreign

The allocation of Trust Distribution Capital Gains between Taxable Australian Property and Non Taxable Australian Property is as follows:

**Taxable Australian Property** 

- Indexed Method	0
- Other Method	0
- Discount Method	11
Non Taxable Australian Property	
- Indexed Method	0
- Other Method	645
- Discount Method	7,735

#### Non Assessable Income

Fax Exempt, Tax Free, Tax Deferred, Capital Gains Concessions and Non Assessable Non Exempt are non-assessable for taxation purposes. These components may reduce the cost base and/or reduced cost base for capital gains tax purposes and have already been taken into consideration when working out your capital gains tax calculations.

The details of the conduit foreign income which you have received as part of your trust distributions are available in the TRUST DISTRIBUTIONS SCHEDULE under Unfranked – CFI. If you are a resident, this amount is treated as unfranked dividends and is taxable. If you are a non-resident, this amount is not subject to tax.

Franking credits may be denied when paid where an interest in shares is held for less than 45 days. Refer to the Tax Report Guide for more information.

5,265 √

1512 \$106

ALC

## Super Forté

ABN 56 125 834 700

## Self Managed Superannuation Fund Audit Services

PO Box 150, Croydon, Vic 3136 Email: <u>admin@superforte.com.au</u>

Tel 03 8711 3468

Web: www.superforte.com.au

To:

The Trustee

13 June 2018

Quattro Superannuation Fund

Invoice Number: 18304

C/- PO Box 211 Lilydale Vic 3140

### FOR PROFESSIONAL SERVICES

TAX INVOICE

Audit of your Superannuation Fund, in order to form an opinion on the financial report, and whether the Fund complies with Superannuation Industry (Supervision) Act 1993 (SIS Act) and the Superannuation Industry (Supervision) Regulations (SIS Regulations), for the year ended 30 June 2017.

Our fee

\$470.00

Plus GST

\$ 47.00

TOTAL AMOUNT PAYABLE

<u>\$517.00</u>

### PAYMENT IS DUE 14 DAYS FROM INVOICE DATE

 $^{--}$  < Please detach & send the bottom portion with your payment  $^{--}$ 

## METHODS OF PAYMENT

1. <u>CREDIT CARD:</u> Complete following and email to <u>admin@superforte.com.au</u> *OR* mail to Super Forté, PO Box 150, Croydon VIC 3136.

Mastercard/ Visa (please circle one)

 Card No:
 Expires:
 \_\_\_/\_\_

 Name on Card:
 CCV:
 \_\_\_\_\_/

Signature:

CHEQUE: Please forward to: Super Forté PO Box 150, Croydon VIC 3136

4. <u>DIRECT CREDIT:</u> Westpac: BSB: 033-044 Acc: 363699 (Super Forté)

Please put invoice number in description when making direct deposit payments
Invoice Number 18304 \$517.00 Quattro SF



**OnePath Life Limited** ABN 33 009 657 176

GPO Box 4148 Sydney 347 Kent Street Sydney NSW 2000 Aus Telephone 133 667 Facsimile (02) 9262 53

## ANNUAL LIFE INSURANCE STATEMENT

Each year we provide this Insurance Statement to confirm your cover and to let you know about any change to your premium.

Policy Number: 931067-3

## PERSONAL DETAILS

Policy Owner:

QUATTRO SUPERANNUATION FUND

Life Insured:

P J DI PIETRANTONIO

Date of Birth:

21 March 1968

Sex:

Male

Smoker-Status:

Non-Smoker

### POLICY DETAILS

LEADING LIFE Product: Superannuation Fund: \$653,019 Life Cover Sum Insured:

Total and Permanent Disability Sum Insured:

\$442,290

Yes

Indexing Sum Insured: Annual Premium:

→ \$2.985.54 ✓

Yearly Instalment Premium:

\$2,985.54

Renewal Date:

9 May 2018 9 May 2000

Policy Start Date:

Policy Expiry Date:

9 May 2037

Annual Policy Fee:

\$83.40

## ADVISER DETAILS

Name:

Mr Nicholas Stanley

Phone:

03 9620 4633

Amount has increased by the C.P.I. rate of 3.00 %.

Premiums may have increased due to age and indexation increases. A loading has been applied to you premium for medical and/or non-medical reasons based on information you provided to us.

This information does not replace your policy terms. See your Product Disclosure Statement and/or Policy Document for full details of the benefits and conditions of the policy. This Annual Insurance Statement is subject to correction in the event of error.

OnePath Life Limited ABN 33 009 657 176

GPO Box 4148 Sydney 2001 347 Kent Street Sydney NSW 2000 Australia Telephone 133 667 Facsimile (02) 9262 5319

## ANNUAL LIFE INSURANCE STATEMENT

Each year we provide this Insurance Statement to confirm your cover and to let you know about any change to your premium.

Policy Number: 932881-6

## PERSONAL DETAILS

Policy Owner:

QUATTRO SUPERANNUATION FUND

Life Insured:

M DI PIETRANTONIO

Date of Birth:

6 November 1968

Sex:

Female

Smoker-Status:

Non-Smoker

## **POLICY DETAILS**

Product: LEADING LIFE

Fund: Superannuation

Life Cover Sum Insured: \$653,020

Total and Permanent Disability Sum Insured: \$293,680

Indexing Sum Insured: Yes

# Annual Premium: \$1,647.22 \( \square\$

Yearly Instalment Premium: \$1,647.22 Renewal Date: 29 May 2018

Policy Start Date: 29 May 2000 Policy Expiry Date: 29 May 2038

\* Annual Policy Fee: \$83.40

### ADVISER DETAILS

Name:

Mr Nicholas Stanley

Phone:

03 9620 4633

- \* Amount has increased by the C.P.I. rate of 3.00 %.
- # Premiums may have increased due to age and indexation increases.

This information does not replace your policy terms. See your Product Disclosure Statement and/or Policy Document for full details of the benefits and conditions of the policy. This Annual Insurance Statement is subject to correction in the event of error.



Quattro Superannuation Fund 7 Woodlee Rise LILYDALE VIC 3140

Policy Number 81234164 Term Life Insured Person Mr Angelo Poli

Policy Owner/Trustee Quattro Superannuation Fund

Your Adviser Mr NICHOLAS

27 March 2019

STANLEY 03 9620 4633

**Customer Service** 

**1800 221 727** 

Internet

🕙 www.asteronlife.com.au

Dear Trustees,

We refer to your recent request regarding your policy.

Shown below is the total value of premiums paid to us for your policy during the previous financial years.

Financial Year	Benefit Description	Premium Paid	
2017-2018	Term Life	\$1864.94 🗸	

If you have any further enquiries, please contact Customer Service.

Yours sincerely

Administration Team
Asteron Life Customer Service

cc: Mr NICHOLAS STANLEY