

NOMINATION OF BENEFICIARY

THE PFEIFFER SUPERANNUATION FUND

I, **Beverley Dawn Pfeiffer**, being a member of the **Pfeiffer Superannuation Fund** nominate the following persons and request that, in the event of my death, the Trustees of the Fund consider them when exercising their discretion in determining payment of my entitlements under the Fund.

Name & Address of Person Date of Birth Relationship to Member Benefit Proportion (%)

KSERSTI SELNES 21/1/56 partner 100%

I understand that this nomination can be either binding or non-binding upon the Trustee, and that in the case of non-binding, the Trustee does not have to follow my nomination.

I have indicated by marking the box below () whether this nomination is to be binding or non-binding upon the Trustee:

() Binding () Non-Binding

I understand:

- That I am entitled to revoke the nomination, in whole or in part, at any time; and
- That the Trustee must comply with the requirement of the Superannuation Industry (Supervision) Act and Regulations when determining payment of my entitlement under the Fund.

If I have indicated that this nomination is binding, I wish to make the declaration next to the box marked () below in relation to the period for which it has effect:

() I declare that this nomination will continue to bind the trustee until I revoke it.

() I declare that this nomination will continue to bind the trustee for a period of years after which time it will become non-binding unless I renew it.

Beverley Dawn Pfeiffer
Member

15.12.17
Date

DECLARATION BY WITNESS (This declaration need only be completed if this nomination is binding on the Trustee. There must be 2 witnesses both over the age of 18 and neither mentioned as a beneficiary in this notice.)

I, BEVERLEY DAWN PFEIFFER
declare that this notice was signed by

I, BEVERLEY DAWN PFEIFFER
declare that this notice was signed by

MARIANNE PITELLI
in my presence:

VICTORIA ADCROFT
in my presence:

Signature of witness M. Pitelli

Signature of witness V. Adcroft

Dated 15.12.17

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