WEEKS SUPER FUND

TFN: 575 056 847

PART A Electronic lodgment declaration (Form P, T, F, SMSF or EX)

This declaration is to be completed where the tax return is to be lodged via an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties many apply for failure to do so.

Privacy
The ATO is authorised by the Taxation Administration Act 1963 to request the provision of tax file numbers (TFNs). The ATO will use the TFNs to identify each partner or beneficiary or entity in our records. It is not an offence not to provide the TFNs. However, you cannot lodge your tax return electronically if you do not quote your TFN.

Taxation law authorises the ATO to collect information and disclose it to other government agencies, including personal information about the person authorised to sign the declaration. For information about privacy go to ato.gov.au/privacy

The Australian Business Register

The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the registe).

Please refer to the privacy statement on the commitment to safeguarding your details. stralian Business Register (ABR) website (www.abr.gov.au) for further information – it outlines our

Electronic funds transfer - direct debit

Where you have requested an EFT direct depit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your texation liability from your nominated account.

Tax file number 575 056 847 Year 2021 Name of partnership, trust, fund or entity WEEKS SUPER FUND

I authorise my tax agent to electronically transmit this tax return via an approved ATO electronic chann **Important**

Before making this declaration please check to ensure that all income has been disclosed and the tax return is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the Tax Office. The tax law provides heavy penalties for false or misleading statements

Declaration: I declare that:

- the information provided to the agent for the preparation of this tax return, including any applicable schedules is true and correct, and
the agent is authorised to lodge this tax return. Signature of partner, trustee or director

PART B

Electronic funds transfer consent

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is reques ATO electronic lodgment channel. d and the tax return is being lodged through an approved

This declaration must be signed by the partner, trustee, director or public officer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

Agent's reference 74618002 Account Name WEEKS FAMILY PTY LTD ATF WEEKS SUPER FUND I authorise the refund to be deposited directly to the specified account. Signature

PART D

CRASE CONSULTING GROUP PTY LTD

Tax agent's certificate (shared facilities only)

I declare that: I have prepared this tax return in accordance with the information supplied by the partner, trustee, director or public office. I have received a declaration made by the entity that the information provided to me for the preparation of this tax return is I have received a declaration ma correct, and I am autho d by the partner, tru e, director or public officer to lodge this tax return, including any applicable schedules. Agent's signature 10-5-2022 Date Client reference WEEK1007 Contact MR DAVID CRASE Agent's reference number 74618002 08 82311888 Agent's phone numb