

PO Box 163 Hamilton Q 4007



Director: Taneile White CA

29 June 2018

Dr Paul & Mrs Patricia Robinson Robinson Superannuation Fund PO Box 750 SURFERS PARADISE QLD 4217

Dear Paul & Patricia,

RE: ROBINSON SUPERANNUATION FUND

The purpose of this letter is to provide you with further information regarding our fees and to set out our understanding of the terms of this engagement and the nature of the services we will provide for the year ended 30 June 2018.

SCOPE OF OUR WORK

We will perform the following services:

- Preparation of financial statements
- Preparation of income tax returns
- General advice on various tax and accounting issues

Our procedures will be limited to those related to the above services, and accordingly (except where indicated above):

- no audit or review will be performed, and therefore no assurance will be expressed;
- our engagement cannot be relied upon to disclose fraud or other irregularities or errors. However, we will inform you if any such matters do come to our attention in the course of our engagement.

TIMING OF YOUR WORK

We advise in order to meet Australian Tax Office deadline requirements we require your work to be forwarded no later than 31 January every year. We will contact you in the near future with respect to providing you with a check list of the information we will require.

INFORMATION TO BE PROVIDED BY YOU

Under this engagement, you will be responsible for providing all information required to enable us to prepare your financial accounts and taxation returns as efficiently and quickly as possible.



OUR FEES

Our fees, which will be billed as work progresses, are based on the time taken by staff assigned to the engagement plus direct out of pocket expenses. Our hourly charge rate is as follows:

Tony Micalizzi \$330 per hour plus GST Taneile White \$210 per hour plus GST Peter Foo \$140 per hour plus GST Courtney Henderson \$140 per hour plus GST Sam Micalizzi \$140 per hour plus GST Susan Scully \$100 per hour plus GST Beverley Cope \$70 per hour plus GST David Hamilton \$60 per hour plus GST

This quotation is conditional upon receiving the required information to a satisfactory standard. Should this not be the case, we reserve the right to amend this quotation at a later date.

CHANGE ORDER

In the event that you do not provide all of the information required to complete your work, or if we find that we are required to complete work beyond the scope of our quotation, we will furnish you with a Change Order which will specify the additional cost of our services. We will not commence that work until you have signed and returned the Change Order to us.

CLIENT SERVICE

Our main objective is to assist our clients maintain and increase profitability. Our staff are available to you at any time should you have any queries or require advice on a business-related matter.

Your file is being managed by Taneile White.

We are committed to providing high quality client service. If you have any concerns or queries about the service you are receiving, please contact the director in charge of your file immediately. We will look into the matter promptly and thoroughly, to address any problems.

We value your comments and would be pleased to hear from you in relation to our service.

We thank you for the opportunity to be of service to you.

We draw your attention to the fact the firm is covered by a Limitation of Liability Scheme as prescribed by the relevant state professional standards legislation.

Please contact our office if you wish to discuss any of the issues addressed in this letter or require additional information.

Yours sincerely

MCA Chartered Accountants

TWLE

Taneile White Director

 $F. WPROBI0003_A18_MCA. Engagement_2018. documents and the property of the pr$

I understand and acknowledge the terms of your engagement.

Name: Paul Robinson Date: 29 June 2018

Minutes of a meeting of the Director(s)

/ 2019 at PO Box 750, Surfers Paradise, Queensland 4217 held on

PRESENT:

Paul Robinson and Patricia Robinson

MINUTES:

The Chair reported that the minutes of the previous meeting had been signed as a true record.

FINANCIAL STATEMENTS OF SUPERANNUATION FUND:

It was resolved that the financial statements would be prepared as special purpose financial statements as, in the opinion of the trustee(s), the superannuation fund is a non-reporting entity and therefore is not required to comply with all Australian Accounting Standards.

The Chair tabled the financial statements and notes to the financial statements of the superannuation fund in respect of the year ended 30 June 2018 and it was resolved that such statements be and are hereby adopted as tabled.

TRUSTEE'S DECLARATION:

It was resolved that the trustee's declaration of the superannuation fund be

signed.

ANNUAL RETURN:

Being satisfied that the fund had complied with the requirements of the Superannuation Industry (Supervision) Act 1993 (SISA) and Regulations during the year ended 30 June 2018, it was resolved that the annual return be approved, signed and lodged with the Australian Taxation Office.

TRUST DEED:

The Chair tabled advice received from the fund's legal adviser confirming that the fund's trust deed is consistent with all relevant superannuation and trust

The allocation of the fund's assets and the fund's investment performance over this financial year were reviewed and found to be within the acceptable ranges outlined in the investment strategy. After considering the risk, rate of return and liquidity of the investments and the ability of the fund to discharge its existing liabilities, it was resolved that the investment strategy continues to reflect the purposes and circumstances of the fund and its members. Accordingly, no changes in the investment strategy were required.

INSURANCE COVER:

INVESTMENT STRATEGY:

The trustee(s) reviewed the current life and total and permanent disability insurance coverage on offer to the members and resolved that the current insurance arrangements were appropriate for the fund.

ALLOCATION OF INCOME:

It was resolved that the income of the fund would be allocated to the members based on their average daily balance (an alternative allocation basis may be percentage of opening balance).

INVESTMENT ACQUISITIONS:

It was resolved to ratify the investment acquisitions throughout the financial year ended 30 June 2018.

INVESTMENT DISPOSALS:

It was resolved to ratify the investment disposals throughout the financial year ended 30 June 2018.

AUDITORS:

It was resolved that

Anthony Boys

of

PO Box 3376, Rundle Mall, South Australia 5000

act as auditors of the Fund for the next financial year.

Robinson Superannuation Fund

Minutes of a meeting of the Director(s)

/ 2019 at PO Box 750, Surfers Paradise, Queensland 4217 held on

TAX AGENTS:

It was resolved that

Mca (Qld) Accountants Pty Ltd

act as tax agents of the Fund for the next financial year.

TRUSTEE STATUS:

Each of the trustee(s) confirmed that they are qualified to act as trustee(s) of the fund and that they are not disqualified persons as defined by s 120 of the SISA.

CONTRIBUTIONS RECEIVED:

It was resolved that the contributions during the year be allocated to members on the basis of the schedule provided by the principal Fund employer.

PAYMENT OF BENEFITS:

The trustee has ensured that any payment of benefits made from the Fund, meets the requirements of the Fund's deed and does not breach the superannuation laws in relation to:

1. making payments to members; and,

2. breaching the Fund or the member investment strategy.

The trustee has reviewed the payment of the benefit and received advice that the transfer is in accordance with the Deed and the superannuation laws. As such the trustee has resolved to allow the payment of the benefits on behalf of the member.

CLOSURE:

All resolutions for this meeting were made in accordance with the SISA and Regulations.

There being no further business the meeting then closed.

Signed as a true record

Paul Robinson

Chairperson

Deductions Notice Letter

Roan Industries Pty Ltd as trustee for Robinson Superannuation Fund acknowledges that

Paul Robinson

has advised in writing in accordance with Section 290-170 of the Income Tax Assessment Act 1997 the intention to claim a tax deduction of

\$20,462.27

for contributions paid in the year ended 30 June 2018. The Trustee has taken action to deduct the appropriate level of tax from the contributions claimed.

Paul Robinson

Date: 30 / 06 / 2018

*IMPORTANT INFORMATION - PLEASE READ THE FOLLOWING CAREFULLY **

If your records confirm the above amount claimed no action on your behalf is required. Retain this acknowledgement with your taxation records as it may be requested by the Australian Taxation Office to substantiate your tax deduction for Superannuation Contributions.

Otherwise: Complete the details below and return this form to the Trustee if:

- 1. The amount shown above is not the amount that will be claimed, or
- 2. The Australian Taxation Office disallows/reduces the amount you claim.

In terms of Section 290-170 of the Income Tax Assessment Act 1997 I advise that the amount I intend to claim as a tax deduction for the period 01 July 2017 to 30 June 2018 is: \$______

-Paul Robinson -

Date: 30 / 06 / 2018-

Notice of intent to claim or vary a deduction for personal super contributions

Section A: Your details

iax file number (1 FN)						
481058409						
super fund. Your super fund is authoris Industry (Supervision) Act 1993, the Inconfence not to provide your TFN. Howe they will not be permitted to accept the	ed to reque come Tax A ever, if you c e contribution	est your persona Assessment Act do not provide y	al details, including yo 1997 and the <i>Taxatic</i> our TFN, and your su	our TFN, i on <i>Admin</i> uper fund	under the <i>Super</i> istration Act 195 doesn't already	rannuation 53. It is not an hold your TFN,
Name						
		Other				
744 144 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Other given name	<u></u>			
OL						
Date of birth 23/10/1944 Current postal address						
					State/territory	Postcode
RFERS PARADISE					QLD	4217
ntry if outside of Australia					(Australia only)	(Australia only)
Daytime phone number (include a	urea code)	0755387859				
ection B: Super fund's	details	S				
Fund name						
BINSON SUPERANNUATION FUNI)					
Fund Australian business numb	er (ABN)	3712586402	3			
Member account number ROB	PAU00004	4A				
Unique Superannuation Identific	er (USI) (it	f known)				
	The ATO does not collect this inforsuper fund. Your super fund is authoris Industry (Supervision) Act 1993, the Incoffence not to provide your TFN. Howe they will not be permitted to accept the contact the entity you are providing this Name DR In part of birth Date of birth Current postal address BOX 750 Industry (Supervision) Act 1993, the Incompanient of the Incompanient of the Incompanient of the Incompanient of Incom	The ATO does not collect this information prosuper fund. Your super fund is authorised to requeindustry (Supervision) Act 1993, the Income Tax A offence not to provide your TFN. However, if you they will not be permitted to accept the contribution contact the entity you are providing this form to. Name DR Ily name BINSON given name UL Date of birth 23/10/1944 Current postal address BOX 750 Arb/town/locality RFERS PARADISE Intry if outside of Australia Daytime phone number (include area code) Poction B: Super fund's details Fund name BINSON SUPERANNUATION FUND Fund Australian business number (ABN) Member account number ROBPAU00000	The ATO does not collect this information provided on this for super fund. Your super fund is authorised to request your personal Industry (Supervision) Act 1993, the Income Tax Assessment Act offence not to provide your TFN. However, if you do not provide you they will not be permitted to accept the contribution(s) covered by contact the entity you are providing this form to. Name DR In part DR	### The ATO does not collect this information provided on this form. This form is to as super fund. Your super fund is authorised to request your personal details, including you industry (Supervision) Act 1993, the Income Tax Assessment Act 1997 and the Taxatic offence not to provide your TFN. However, if you do not provide your TFN, and your st they will not be permitted to accept the contribution(s) covered by this notice. For more contact the entity you are providing this form to. **Name** DR	### ### ### ### ### ### ### ### ### ##	### The ATO does not collect this information provided on this form. This form is to assist you in providing details super fund. Your super fund is authorised to request your personal details, including your TFN, under the Super Industry (Supervision) Act 1993, the Income Tax Assessment Act 1997 and the Taxation Administration Act 1997 and the Taxation Administration Act officence not to provide your provide your provide your super fund doesn't already they will not be permitted to accept the contribution(s) covered by this notice. For more information about your contact the entity you are providing this form to. **Name** DR

Se	ection C: Contribution details		
10	Personal contribution details		
	Is this notice varying an earlier notice? No X	7	
	if you answered 'No' complete the Original Notice to Claim a If you answered 'Yes' complete the Variation of previous valid	 Tax Deduction section be notice of intent section be 	elow. pelow.
	ORIGINAL NOTICE TO CLAIM A TAX DEDUCTION		
11	Financial year ended 30 June 20 18		
12	My personal contributions to this fund in the above to	inancial vear	\$ 20462.27
	The amount of these personal contributions I will be a tax deduction	-	\$ 20462.27
Se	ection D: Declaration		
sign	form has a declaration where you say the information in it is correct the declaration. If you provide false or misleading information, or alties imposed by taxation law. INTENTION TO CLAIM A TAX DEDUCTION	fail to take reasonable ca	re, you may be liable to administrativ
	Complete this declaration if you have not previously lodge	d a valid notice with your	super fund for these contributions.
	I declare that at the time of lodging this notice: I intend to claim the personal contributions stated as a tax deduction I am a current member of the identified super fund the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions I have not included any of the contributions in an earlier valid notice.	 before the end of the return for the income your contributions were may before the end of the in which the contributions 	ncome year following the year
	Name (Print in BLOCK LETTERS)		
	PAUL ROBINSON		
	Signature		Date 30/06/2018
0	Sand valir completed acting to valir and D		
sur	Send your completed notice to your super fund. Do not send i per fund. We don't collect this information; we only provide a form	t to us . The information on the for you to provide the i	n this notice is for you and your nformation to your super fund.
14	VARIATION OF PREVIOUS VALID NOTICE OF INTENT	Т	
	Financial year ended 30 June 20		
	My personal contributions to this fund in the above f	_	\$
	The amount of these personal contributions claimed of intent		4
17	The amount of these personal contributions I will no deduction	w be claiming as a ta	× \$

Declaration

This form has a declaration where you sign to indicate that the information in it is correct and complete. Please review the information before you sign the declaration. If you provide false or misleading information, or fail to take reasonable care, you may be liable to administrative penalties imposed by taxation law.

Ocmplete this declaration if you have already lodged a valid notice with your fund for these contributions and you wish to reduce the amount stated in that notice.

VARIATION OF PREVIOUS VALID NOTICE OF INTENT

I declare that at the time of lodging this notice:

- I intend to claim the personal contributions stated as a tax deduction
- I am a current member of the identified super fund
- the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions.

I declare that I wish to vary my previous valid notice for these contributions by **reducing** the amount I advised in my previous notice and I confirm that either:

I have lodged my income tax return for the year in which the contribution was made, prior to the end of the following income year, and this variation notice is being lodged before the end of the day on which the return was lodged, or

- I have not yet lodged my income tax return for the relevant year and this variation notice is being lodged on or before 30 June in the financial year following the year in which the personal contributions were made, or
- the ATO has disallowed my claim for a deduction for the relevant year and this notice reduces the amount stated in my previous valid notice by the amount that has been disallowed.

I declare that the information given on this notice is correct and complete.

Name (Print in BLOCK LETTERS)	
Signature	
	Date

Send your completed variation notice to your super fund. **Do not send it to us.** The information on this notice is for you and your super fund. We don't collect this information; we only provide a format for you to provide the information to your super fund.

Deductions Notice Letter

Roan Industries Pty Ltd as trustee for Robinson Superannuation Fund acknowledges that

Patricia Robinson

has advised in writing in accordance with Section 290-170 of the Income Tax Assessment Act 1997 the intention to claim a tax deduction of

\$25,000

for contributions paid in the year ended 30 June 2018. The Trustee has taken action to deduct the appropriate level of tax from the contributions claimed.

Patricia Robinson

Date: 30 / 06 / 2018

If your records confirm the above amount claimed no action on your behalf is required. Retain this acknowledgement with your taxation records as it may be requested by the Australian Taxation Office to substantiate your tax deduction for Superannuation Contributions.

Otherwise: Complete the details below and return this form to the Trustee if:

- 1. The amount shown above is not the amount that will be claimed, or
- 2. The Australian Taxation Office disallows/reduces the amount you claim.

In terms of Section 290-170 of the Income Tax Assessment Act 1997 I advise that the amount I intend to claim as a tax deduction for the period 01 July 2017 to 30 June 2018 is: \$

Patricia Robinson

-Date: 30 / 06 / 2018

Notice of intent to claim or vary a deduction for personal super contributions

Section A: Your details

1 Tax file number (TFN)

479217901

The ATO does not collect this information provided on this form. This form is to assis super fund. Your super fund is authorised to request your personal details, including your <i>Industry (Supervision) Act 1993</i> , the <i>Income Tax Assessment Act 1997</i> and the <i>Taxation of</i> offence not to provide your TFN. However, if you do not provide your TFN, and your super they will not be permitted to accept the contribution(s) covered by this notice. For more in contact the entity you are providing this form to.	TFN, under the <i>Super</i> Administration Act 198 er fund doesn't already	rannuation 53. It is not an hold your TFN,
2 Name		
Title: MRS		
Family name		
ROBINSON		
First given name Other given names		
PATRICIA		
3 Date of birth 04/12/1945 4 Current postal address PO BOX 750	- Application	Section of the Sectio
Suburb/town/locality SURFERS PARADISE Country if outside of Australia	State/territory QLD (Australia only)	Postcode 4217 (Australia only)
5 Daytime phone number (include area code) 0755387859	•	
Section B: Super fund's details		· /// · · · · · · · · · · · · · · · · ·
6 Fund name		
ROBINSON SUPERANNUATION FUND	4	
7 Fund Australian business number (ABN) 37125864023		
8 Member account number ROBPAT00004A		
9 Unique Superannuation Identifier (USI) (if known)		

Se	ction C: Contribution details			
0	Personal contribution details			
	Is this notice varying an earlier notice?			
	If you answered 'No' complete the Original Notice to Claim a Tax D If you answered 'Yes' complete the Variation of previous valid notice			
	ORIGINAL NOTICE TO CLAIM A TAX DEDUCTION			
1	Financial year ended 30 June 20 18			
2	My personal contributions to this fund in the above finar	icial year	\$ 25000.00	
13	The amount of these personal contributions I will be clair a tax deduction	ming as	\$ 25000.00	
 3e	ection D: Declaration		10-18-1-18-18-18-18-18-18-18-18-18-18-18-1	-
sign	form has a declaration where you say the information in it is correct a the declaration. If you provide false or misleading information, or fail talties imposed by taxation law. INTENTION TO CLAIM A TAX DEDUCTION			ε
	Complete this declaration if you have not previously lodged a v	alid notice with your s	super fund for these contributions.	
	■ I intend to claim the personal contributions stated as a tax deduction not be a lam a current member of the identified super fund the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on these contributions I defined the stream based in whole or part on the stream based in whole or part of the stream based	pefore the end of the control of the control of the income yout the income the income the income the income the the contribution which the contribution	ncome year following the year	
	Name (Print in BLOCK LETTERS)			
	PATRICIA ROBINSON			
	Signature Zer		Date 30/06/2018	
Su	Send your completed notice to your super fund. Do not send it to per fund. We don't collect this information; we only provide a format for	us. The information or or you to provide the i	n this notice is for you and your nformation to your super fund.	-
	VARIATION OF PREVIOUS VALID NOTICE OF INTENT			-
	Financial year ended 30 June 20			
15	My personal contributions to this fund in the above final	ıcial year	\$	
	The amount of these personal contributions claimed in of intent		Ψ	
17	The amount of these personal contributions I will now be deduction	e claiming as a ta	× \$	

Declaration

This form has a declaration where you sign to indicate that the information in it is correct and complete. Please review the information before you sign the declaration. If you provide false or misleading information, or fail to take reasonable care, you may be liable to administrative penalties imposed by taxation law.

Ocmplete this declaration if you have already lodged a valid notice with your fund for these contributions and you wish to reduce the amount stated in that notice.

WARIATION OF PREVIOUS VALID NOTICE OF INTENT

I decisre that at the time of lodging this notice:

- I intend to claim the personal contributions stated as a tax deduction
- I am a current member of the identified super fund
- the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions.

I declare that I wish to vary my previous valid notice for these contributions by **reducing** the amount I advised in my previous notice and I confirm that either:

I have lodged my income tax return for the year in which the contribution was made, prior to the end of the following income year, and this variation notice is being lodged before the end of the day on which the return was ladged, or

- I have not yet lodged my income tax return for the relevant year and this variation notice is being lodged on or before 30 June in the financial year following the year in which the personal contributions were made, or
- a the ATO has disallowed my claim for a deduction for the relevant year and this notice reduces the amount stated in my previous valid notice by the amount that has been disallowed.

I declare that the information given on this notice is correct and complete.

Name (Print in BLOCK LETTERS)			
Signature		_	
		Date	
71.77	 		

Send your completed variation notice to your super fund. Do not send it to us. The information on this notice is for you and your super fund. We don't collect this information; we only provide a format for you to provide the information to your super fund.

WORK TEST DECLARATION

I, Patricia Robinson, of 49 Monaco Street, Broadbeach Waters Qld 4218 confirm that I was gainfully employed for at least 40 hours in a continuous 30 day period during the 2018 financial year before my superannuation contributions were made during the year.

And I make this solemn declaration conscientiously believing the same to be true and correct.

Declared and signed this

day of

20

Patricia Robinson

WORK TEST DECLARATION

I, Paul Robinson, of 49 Monaco Street, Broadbeach Waters Qld 4218 confirm that I was gainfully employed for at least 40 hours in a continuous 30 day period during the 2018 financial year before my superannuation contributions were made during the year.

And I make this solemn declaration conscientiously believing the same to be true and correct.

20

Declared and signed this

day of

Paul Robinson

19 February 2019

The Trustee Robinson Superannuation Fund PO Box 750 **SURFERS PARADISE QLD 4217**

Dear Sir,

We confirm that the following contributions were received by the Robinson Superannuation Fund as Member Contributions, and that Paul & Patricia Robinson will be claiming a deduction in their personal income tax returns, as confirmed by the s290-170 Deduction Notices:

For Paul Robinson

\$20,462.27

Concessional

For Patricia Robinson

\$25,000.00 Concessional

We also confirm the following contributions were received by the above fund as Employer Contributions.

For Paul Robinson

\$4,537.73 Concessional

Yours faithfully

Paul Robinson

Member

Patricia Robinson

Member

AUDITOR ENGAGEMENT LETTER

To: The Trustees of the Robinson Superannuation Fund

Scope

You have requested that we audit the financial report of the Robinson Superannuation Fund, which comprises the balance sheet as at 30 June 2018, the income statement for the year then ended, a summary of significant accounting policies, other explanatory notes and the trustees' declaration. We are pleased to confirm our acceptance and our understanding of this engagement by means of this letter. Our audit will be conducted with the objective of expressing an opinion on the financial report and compliance with the Superannuation Industry Supervisory Act 1993.

We will conduct our audit in accordance with Australian Auditing Standards. Those Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement. An audit involves performing audit procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. An audit also includes evaluating the appropriateness of the financial reporting framework, accounting policies used and the reasonableness of accounting estimates made by the Trustees, as well as evaluating the overall presentation of the financial report.

Because of the test nature and other inherent limitations of an audit, together with the inherent limitations of any accounting and internal control system, there is an unavoidable risk that even some material misstatements may remain undiscovered. In making our risk assessments, we consider internal control relevant to the entity's preparation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control.

We take this opportunity to remind you that the responsibility for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations) and the Superannuation Industry Supervisory Act 1993 is that of the trustees. Our auditor's report will explain that the trustees are responsible for the preparation and the fair presentation of the financial report in accordance with the applicable financial reporting framework and this responsibility includes:

- designing, implementing and maintaining internal control relevant to the preparation of a financial report that is free from misstatement, whether due to fraud or error:
- · selecting and applying appropriate accounting policies; and
- making accounting estimates that are reasonable in the circumstances.

As part of our audit process, we will request from the trustees written confirmation concerning representations made to us in connection with the audit.

Other Matters under the Corporations Act 2001

Independence

Yours faithfully,

We confirm that, to the best of our knowledge and belief, we currently meet the independence requirements of the *Corporations Act 2001* in relation to the audit of the financial report. In conducting our audit of the financial report, should we become aware that we have contravened the independence requirements of the *Corporations Act 2001*, we shall notify you on a timely basis.

We look forward to your full cooperation and make available to us whatever records, documentation and other information we request in connection with our audit.

Please sign and return the attached copy of this letter to indicate that it is in accordance with your understanding of the arrangements for our audit of the financial report.

A.W. Boys	
Registered Company Auditor 67793	
Dated	
Acknowledged on behalf of the Robinson Superann	uation Fund by
Roan Industries Pty Ltd	
Trustee	
Di de de la companya del companya del la companya del companya de la companya de la companya de la companya del companya de la companya del companya del companya del la companya del com	
Director – Paul Robinson	Date
P== 20 :	
Director – Patricia Robinson	Date

The Audit Partner Anthony W Boys

Dear Sir,

In connection with your examination of the financial reports of the Robinson Superannuation Fund as at 30 June 2018, and for the year then ended, the following representations are made which are true to the best of our knowledge and belief.

(1) Fund Books/Records/Minutes

All financial books, records and related data have been made available to you, including minutes of trustees' meetings and trust deed.

(2) Asset Form

The assets of the fund are being held in a form suitable for the benefit of the members of the fund.

(3) Ownership and Pledging of Assets

- a) The fund has satisfactory title to all assets appearing in the statement of Financial Position.
- b) No assets of the fund have been pledged to secure liabilities of the fund or of others.

(4) Investments

- a) Investments are carried in the books at market value at 30 June 2018.
- b) There are no commitments, fixed or contingent, for the purchase or sale of long-term investments.

(5) Trust Deed

The fund is being conducted in accordance with its trust deed.

(6) Superannuation Legislation

The fund is being conducted in accordance with the Superannuation Industry (Supervision) Act, the Superannuation Industry (Supervision) Regulations, and relevant prescribed requirements.

- a) The trustees have been nominated and may only be removed in such manner and circumstances as are allowed in the trust deed.
- b) Any vacancy among the trustees is filled in accordance with the trust deed.
- c) The trustees have complied with all the trustee standards set out in the Regulations and the covenant prescribed by SIS section 52.

(7) Investment Standards

The trustees have complied with all the Investment Standards set out in the Superannuation Industry (Supervision) Regulations.

(8) Subsequent Events

No events or transactions have occurred since 30 June 2018 or are pending, which have a material effect upon the fund's state of affairs at that date, or which are of significance in relation to the fund's affairs as to require mention in notes to the financial statements in order to ensure they are not misleading as to the state of affairs or results of operations.

Yours Faithfully

Roan Industries Pty Ltd Trustee	
Paul Robinson - Director	Date
Patricia Robinson - Director	 Date

Superannuation lump sum pre-payment statement

Warning: This form has been designed to assist you to prepare the Australian Tax Office's Superannuation lump sum pre-payment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

Section A: Superannuation pro	vider details			
1 Superannuation fund, ADF, RSA or annui				
ROBINSON SUPERANNUATION FUND	ty provider name			
2 Postal address				
PO BOX 750	And the second s			
Suburb/town/locality		·······	State/territory	Postcode
SURFERS PARADISE	****		QLD	4217
3 Australian business number (ABN) or wit				
3 Australian business number (ABN) or wit	nnolder payer number			
37 123604023				
4 Authorised contact person				
Title: DR	•		·····	
amily name				
ROBINSON				
First given name	Other given names			
PAUL		***		
Daytime phone number (include area code)	0755387859			
Section B: Member's details				
Your full name				
Title: DR				····
amily name				
ROBINSON				······
First given name	Other given names	*******		
PAUL				
7 Current postal address				
PO BOX 750		*****		***************************************
Suburb/town/locality			State/territory	Postcode
SURFERS PARADISE			QLD	4217
Poto of high los correspondent				· · · · · · · · · · · · · · · · · · ·
8 Date of birth 23 OCTOBER 1944				

Section C: Superannuation lump sum payment details 9	3
Taxable component Taxed element Interval 17200.56 Untaxed element Tax-free component Tax-free component Sautified amount Preservation amounts of the superannuation lump sum Preserved amount Restricted non-preserved Unrestricted non-preserved Unrestricted non-preserved Sautified 30503.86 Total amount Section D: Superannuation provider's signature Date the statement is issued to the member Member is to return statement by	
Tax-free component \$ 13303.30 Total amount \$ 30503.86 11 Preservation amounts of the superannuation lump sum Preserved amount \$	
Tax-free component \$ 13303.30 Total amount \$ 30503.86 11 Preservation amounts of the superannuation lump sum Preserved amount \$	
Total amount \$ 30503.86 11 Preservation amounts of the superannuation lump sum Preserved amount \$	
Preserved amount \$ Restricted non-preserved \$ Unrestricted non-preserved \$ Total amount \$ Section D: Superannuation provider's signature 12 Date the statement is issued to the member	
Preserved amount \$ Restricted non-preserved \$ Unrestricted non-preserved \$ 30503.86 Total amount \$ Section D: Superannuation provider's signature 12 Date the statement is issued to the member 13 Member is to return statement by	
Restricted non-preserved \$ Unrestricted non-preserved \$ 30503.86 Total amount \$ 30503.86 Section D: Superannuation provider's signature 12 Date the statement is issued to the member 13 Member is to return statement by	
Unrestricted non-preserved \$ 30503.86 Total amount \$ 30503.86 Section D: Superannuation provider's signature 12 Date the statement is issued to the member 13 Member is to return statement by	
Section D: Superannuation provider's signature 12 Date the statement is issued to the member 13 Member is to return statement by	
Section D: Superannuation provider's signature 12 Date the statement is issued to the member 13 Member is to return statement by	
12 Date the statement is issued to the member 13 Member is to return statement by	
12 Date the statement is issued to the member 13 Member is to return statement by	
12 Date the statement is issued to the member 13 Member is to return statement by	
14 Superannuation fund's, ADF's RSA's or annuity provider's signature	
Paul Volume Date	.e

P	ART 2 - MEMBER TO COMPLETE
36	ection E: Cash amount
	Pay me a gross cash amount of: \$ 30503.86 I understand that this amount may be subject to tax.
	You may wish to speak with a tax professional or your superannuation fund, ADF, RSA or annuity provider to make sure you are aware of your tax obligations and superannuation roll over options.
S∈	ection F: Rollover payment Roll over my payment to: (provide the full name of fund, RSA or annuity provider)
	Fund ABN Superannuation fund, ADF, RSA or annuity provider postal address:
ubu	state/territory Postcode
	Member account number
	Roll over an amount of: \$
se	ection G: Member's declaration
	I authorise my superannuation lump sum to be paid as instructed on this statement.
	Name (print in block letters)
	PAUL ROBINSON
	Signature Date
	• You should keep a server of the server

You should keep a copy of the statement for your records for a period of five years.

Superannuation lump sum pre-payment statement

Warming: This form has been designed to assist you to prepare the Australian Tax Office's Superannuation lump sum pre-payment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

PART 1 – SUPERANNUATION	PROVIDER TO CO	MPLETE	
Section A: Superannuation pro	ovider details		
1 Superannuation fund, ADF, RSA or annu			
ROBINSON SUPERANNUATION FUND	Ly provider name		
2 Postal address			
PO BOX 750			
Suburb/town/locality SURFERS PARADISE		State/territory	Postcode
SURFERS PARADISE	······································	QLD	4217
3 Australian business number (ABN) or with	hholder payer number		
37125864023			
4 Authorised contact person			
		·	
Title: DR Family name			
ROBINSON			
First given name	Other given names		
PAUL			
			· · · · · · · · · · · · · · · · · ·
5 Daytime phone number (include area code)	0755387859	_	
Section B: Member's details			
6 Your full name			
Title: DR			··········
Family name			
ROBINSON			<u> </u>
First given name	Other given names		
PAUL		· · · · · · · · · · · · · · · · · · ·	
7 Current postal address			<u></u>
7 Current postal address PO BOX 750			
Suburb/town/locality		State/territory	Postcode
SURFERS PARADISE		QLD	4217
O Data of high los comme			
B Date of birth 23 OCTOBER 1944			

Se	ection C: Superar	nuation lump sum payment details
9	Lump sum payment is calculated to this date	27 JUNE 2018
10	Superannuation lump sa Taxable component	um components
	Taxed element	\$ 721878.25
	Untaxed element	\$
	Tax-free component	\$ 558316.72
	Total amount	\$ 1280194.97
11	Preservation amounts of	f the superannuation lump sum
	Preserved amount	\$
	Restricted non-preserved	\$
	Unrestricted non-preserved	\$ 1280194.97
	Total amount	\$ 1280194.97
Se	ection D: Superan	nuation provider's signature
	Date the statement is is	
13	Member is to return stat	ement by
14	Superannuation fund's,	ADF's, RSA's or annuity provider's signature
		Date

D	ART 2 – MEMBER TO COMPLETE
36	ection E: Cash amount
	Pay me a gross cash amount of: \$ 1280194.97 I understand that this amount may be subject to tax.
	You may wish to speak with a tax professional or your superannuation fund, ADF, RSA or annuity provider to make sure you are aware of your tax obligations and superannuation roll over options.
 3e	ection F: Rollover payment
2	Roll over my payment to: (provide the full name of fund, RSA or annuity provider)
	a state the familiary provider)
	Fund ABN
	Superannuation fund, ADF, RSA or annuity provider postal address:
ub	urb/town/locality State/territory Postcode
	eddo/cimoly Postcode
	Member account number
	Roll over an amount of: \$
_	
>E	ection G: Member's declaration
	I authorise my superannuation lump sum to be paid as instructed on this statement.
	Name (print in block letters)
	PAUL ROBINSON
	Signature
	Date
	You should keep a copy of the statement for your records for a period of five years.

Warning: This form has been designed to assist you to prepare the Australian Tax Office's Superannuation lump sum pre-payment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

Superannuation lump sum pre-payment statement

Warning: This form has been designed to assist you to prepare the Australian Tax Office's Superannuation lump sum pre-payment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

PART 1 – SUPERANNUATION		OMPL	ETE	
Section A: Superannuation pr	ovider details			
 Superannuation fund, ADF, RSA or annu 	ity provider name			
ROBINSON SUPERANNUATION FUND		····	Walks are	- W
2 Postal address		d Amb.	w.	
PO BOX 750				***************************************
Suburb/town/locality		40	State/territory	Postcode
SURFERS PARADISE			QLD	4217
3 Australian business number (ABN) or wi	thholder payer number		•	
4 Authorised contact person				
Title: DR		***************************************		
Family name				
ROBINSON				······································
First given name	Other given names			
PAUL				
5 Daytime phone number (include area code)	0755387859			
Section B: Member's details	-	'	- MacAssall Address	4. Ale
6 Your full name				
Title: MRS				
Family name	The state of the s			"
ROBINSON		······································		****
First given name	Other given names			
PATRICIA				
7 Current postal address				
PO BOX 750	-			
Suburb/town/locality			State/territory	Postcode
SURFERS PARADISE			QLD	4217
8 Date of birth 04 DECEMBER 1945	\neg			

Section C: Superannuation lump sum payment details				
9	Lump sum payment is calculated to this date	27 JUNE 2018		
10	Superannuation lump so	um components		
	Taxed element	\$ 523503.97		
	Untaxed element	\$		
	Tax-free component	\$ 398368.06		
	Total amount	\$ 921872.03		
11	Preservation amounts of	of the superannuation lump sum		
	Preserved amount	\$		
	Restricted non-preserved	\$		
	Unrestricted non-preserved	\$ 921872.03		
	Total amount	\$ 921872.03		
Se	ection D: Superar	nuation provider's signature		
12	_			
13	Member is to return sta	tement by		
14	Superannuation fund's,	ADF's, RSA's or annuity provider's signature		
	C-3	Date Date		

P,	ART 2 – MEMBER TO COMPLETE
3	ection E: Cash amount
	Pay me a gross cash amount of: \$ 921872.03 I understand that this amount may be subject to tax.
	You may wish to speak with a tax professional or your superannuation fund, ADF, RSA or annuity provider to make sure you are aware of your tax obligations and superannuation roll over options.
36	ection F: Rollover payment
<u>}</u>	Roll over my payment to: (provide the full name of fund, RSA or annuity provider)
}	Fund ABN
	Superannuation fund, ADF, RSA or annuity provider postal address:
<u> </u>	
ub	urb/town/locality State/territory Postcode
·	Member account number
,	Roll over an amount of: \$
36	ection G: Member's declaration
	I authorise my superannuation lump sum to be paid as instructed on this statement.
	Name (print in block letters)
	PATRICIA ROBINSON
	Signature
	Pate Date
	Date
	You should keen a copy of the statement for your

You should keep a copy of the statement for your records for a period of five years.

Superannuation lump sum pre-payment statement

Warning: This form has been designed to assist you to prepare the Australian Tax Office's Superannuation lump sum pre-payment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

PART 1 – SUPERANNUATION	PROVIDER TO C	OMPL	ETE	
Section A: Superannuation pro	ovider details			
1 Superannuation fund, ADF, RSA or annui				
ROBINSON SUPERANNUATION FUND	y provider fiding			****
2 Postal address	44	·····	······································	
PO BOX 750	**************************************			
Suburb/town/locality			State/territory	Postcode
SURFERS PARADISE			QLD	4217
3 Australian business number (ABN) or wit	hholder naver number		<u> </u>	
37125864023	meraer payer maniber			
4 Authorised contact person				
Title: DR	the transfer of the transfer o			
Family name			***************************************	
ROBINSON			-/ ·	
First given name	Other given names	·		
PAUL				
5 Daytime phone number (include area code)	0755387859			
Section B: Member's details			Wil	***************************************
6 Your full name				
Title: MRS	**************************************			
Family name				
ROBINSON				
First given name	Other given names			<u>-</u>
PATRICIA				1
7 Current postal address		·		
PO BOX 750		<u> </u>		
Suburb/town/locality				
SURFERS PARADISE	······································		State/territory	Postcode
			QLD	4217
8 Date of birth 04 DECEMBER 1945				

Section C: Superannuation lump sum payment details				
9	Lump sum payment is calculated to this date	27 JUNE 2018		
10	Superannuation lump s Taxable component	um components		
	Taxed element	\$ 17322.24		
	Untaxed element	\$		
	Tax-free component	\$ 13181.61		
	Total amount	\$ 30503.85		
11	Preservation amounts of	f the superannuation lump sum		
	Preserved amount	\$		
	Restricted non-preserved	\$		
	Unrestricted non-preserved	\$ 30503.85		
	Total amount	\$ 30503.85		
Se	ection D: Superan	nuation provider's signature		
	Date the statement is is			
13	Member is to return sta	tement by		
14	Superannuation fund's, ADF's, RSA's or annuity provider's signature			
	Date			

PART 2 – MEMBER TO COMPLETE	
Section E: Cash amount	
Pay me a gross cash amount of: \$ 30503.85 I understand that this amount may be subject to tax.	
You may wish to speak with a tax professional or your superannuation fund, ADF, RSA or annuity provider to make sure you are aware of your tax obligations and superannuation roll over options.	
Section F: Rollover payment	
Roll over my payment to: (provide the full name of fund, RSA or annuity provider)	
Fund ABN	
Superannuation fund, ADF, RSA or annuity provider postal address:	
provider podari address.	
Jburb/town/locality State/territory Postcode	_
Member account number	
Roll over an amount of: \$	
Section G: Member's declaration	
l authorise my superannuation lump sum to be paid as instructed on this statement.	
Name (print in block letters)	
PATRICIA ROBINSON	
Signature	
Date Date	
You should keep a copy of the statement for your records for a period of five years.	

Warning: This form has been designed to assist you to prepare the Australian Tax Office's Superannuation lump sum pre-payment statement. It cannot be lodged with the Australian Tax Office and should not be given to fund members.

Robinson Superannuation Fund

Deductions Notice Letter

Roan Industries Pty Ltd as trustee for Robinson Superannuation Fund acknowledges that

Paul Robinson

has advised in writing in accordance with Section 290-170 of the Income Tax Assessment Act 1997 the intention to claim a tax deduction of

\$20,462.27

for contributions paid in the year ended 30 June 2018. The Trustee has taken action to deduct the appropriate level of tax from the contributions claimed.

Paul Robinson

Date: 30 / 06 / 2018

** MIPORTANT INFORMATION - PLEASE READ THE FOLLOWING CAREFULLY **

If your records confirm the above amount claimed no action on your behalf is required. Retain this acknowledgement with your taxation records as it may be requested by the Australian Taxation Office to substantiate your tax deduction for Superannuation Contributions.

Otherwise: Complete the details below and return this form to the Trustee if:

- 1. The amount shown above is not the amount that will be claimed, or
- 2. The Australian Taxation Office disallows/reduces the amount you claim.

In terms of Section 290-170 of the Income Tax Assessment Act 1997 I advise that the amount I intend to claim as a tax deduction for the period 01 July 2017 to 30 June 2018 is: \$______

Paul Robinson

Date: 30 / 06 / 2018

Notice of intent to claim or vary a deduction for personal super contributions

	ection A: Your details
1	Tax file number (TFN) 481058409
	The ATO does not collect this information provided on this form. This form is to assist you in providing details to your super fund. Your super fund is authorised to request your personal details, including your TFN, under the Superannuation Industry (Supervision) Act 1993, the Income Tax Assessment Act 1997 and the Taxation Administration Act 1953. It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution(s) covered by this notice. For more information about your privacy please contact the entity you are providing this form to.
2	Name
Title	: DR
Farr	nily name
RO	DBINSON
	given name Other given names
PΑ	.UL
3 4 PC	Date of birth 23/10/1944 Current postal address BOX 750
Sub	urb/town/locality State/territory Postcode
SU	RFERS PARADISE QLD 4217
Cou	ntry if outside of Australia (Australia only) (Australia only)
5	Daytime phone number (include area code) 0755387859
Se	ection B: Super fund's details
6	Fund name
RC	OBINSON SUPERANNUATION FUND
7	Fund Australian business number (ABN) 37125864023
3	Member account number ROBPAU00004A
9	Unique Superannuation Identifier (USI) (if known)

Section C: Contribution details	
10 Personal contribution details	
Is this notice varying an earlier notice? No X	s
If you answered 'No' complete the Original Notice to Claim If you answered 'Yes' complete the Variation of previous va	a Tax Deduction section below. lid notice of intent section below.
ORIGINAL NOTICE TO CLAIM A TAX DEDUCTION	
11 Financial year ended 30 June 20 18	
12 My personal contributions to this fund in the abov	e financial year \$ 20462.27
13 The amount of these personal contributions I will I a tax deduction	• • • • • • • • • • • • • • • • • • • •
Section D: Declaration	
This form has a declaration where you say the information in it is can sign the declaration. If you provide false or misleading information, penalties imposed by taxation law.	orrect and complete. Please review the information before you or fail to take reasonable care, you may be liable to administrativ
INTENTION TO CLAIM A TAX DEDUCTION	
Complete this declaration if you have not previously lod	ged a valid notice with your super fund for these contributions.
I declare that at the time of lodging this notice: I intend to claim the personal contributions stated as a tax deduction I am a current member of the identified super fund the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions I have not included any of the contributions in an earlier valid notice.	I declare that I am lodging this notice at the earlier of either: before the end of the day that I lodged my income tax return for the income year in which the personal contributions were made, or before the end of the income year following the year.
Name (Print in BLOCK LETTERS)	
PAUL ROBINSON	
Signature	Date
	30/06/2018
Send your completed notice to your super fund. Do not send super fund. We don't collect this information; we only provide a forward variation of PREVIOUS VALID NOTICE OF INTERM.	rrnat for you to provide the information to your super fund.
14 Financial year ended 30 June 20	
15 My personal contributions to this fund in the above	e financial year \$
16 The amount of these personal contributions claims of intent	ed in my original notice \$
17 The amount of these personal contributions I will n deduction	ow be claiming as a tax \$

Declaration

This form has a declaration where you sign to indicate that the information in it is correct and complete. Please review the information before you sign the declaration. If you provide false or misleading information, or fail to take reasonable care, you may be liable to administrative penalties imposed by taxation law.

Complete this declaration if you have already lodged a valid notice with your fund for these contributions and you wish to reduce the amount stated in that notice.

VARIATION OF PREVIOUS VALID NOTICE OF INTENT

I declare that at the time of lodging this notice:

- I intend to claim the personal contributions stated as a tax deduction
- I am a current member of the identified super fund
- the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions.

I declare that I wish to vary my previous valid notice for these contributions by **reducing** the amount I advised in my previous notice and I confirm that either:

I have lodged my income tax return for the year in which the contribution was made, prior to the end of the following income year, and this variation notice is being lodged before the end of the day on which the return was lodged, or

- I have not yet lodged my income tax return for the relevant year and this variation notice is being lodged on or before 30 June in the financial year following the year in which the personal contributions were made, or
- the ATO has disallowed my claim for a deduction for the relevant year and this notice reduces the amount stated in my previous valid notice by the amount that has been disallowed.

I declare that the information given on this notice is correct and complete.

ame (Print in BLOCK LETTERS	
gnature	
	Date

Send your completed variation notice to your super fund. **Do not send it to us.** The information on this notice is for you and your super fund. We don't collect this information; we only provide a format for you to provide the information to your super fund.

Robinson Superannuation Fund

Deductions Notice Letter

Roan Industries Pty Ltd as trustee for Robinson Superannuation Fund acknowledges that

Patricia Robinson

has advised in writing in accordance with Section 290-170 of the Income Tax Assessment Act 1997 the intention to claim a tax deduction of

\$25,000

for contributions paid in the year ended 30 June 2018. The Trustee has taken action to deduct the appropriate level of tax from the contributions claimed.

Patricia Robinson

Date: 30 / 06 / 2018

** IMPORTANT INFORMATION - PLEASE READ THE FOLLOWING CAREFULLY **

If your records confirm the above amount claimed no action on your behalf is required. Retain this acknowledgement with your taxation records as it may be requested by the Australian Taxation Office to substantiate your tax deduction for Superannuation Contributions.

Otherwise: Complete the details below and return this form to the Trustee if:

- 1. The amount shown above is not the amount that will be claimed, or
- 2. The Australian Taxation Office disallows/reduces the amount you claim.

In terms of Section 290-170 of the Income Tax Assessment Act 1997 I advise that the amount I intend to claim as a tax deduction for the period 01 July 2017 to 30 June 2018 is: \$_____

Patricia Robinson

Date: 30 / 06 / 2018

Notice of intent to claim or vary a deduction for personal super contributions

90	ection A: Your details
1	· · · · · · · · · · · · · · · · · · ·
•	Tax file number (TFN) 479217901
	The ATO does not collect this information provided on this form. This form is to assist you in providing details to your super fund. Your super fund is authorised to request your personal details, including your TFN, under the Superannuation Industry (Supervision) Act 1993, the Income Tax Assessment Act 1997 and the Taxation Administration Act 1953. It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution(s) covered by this notice. For more information about your privacy please contact the entity you are providing this form to.
	oshidot tric entity you are providing this form to.
2	Name
Title:	MRS
Fami	ly name
RO	BINSON
First	given name Other given names
PA	TRICIA
PO Subu	Current postal address BOX 750 rb/town/locality RFERS PARADISE O4/12/1945 State/territory Postcode QLD 4217
Count	try if outside of Australia (Australia only) (Australia only) (Australia only)
5	Daytime phone number (include area code) 0755387859
Se	ction B: Super fund's details
6	Fund name
	BINSON SUPERANNUATION FUND
7 i	Fund Australian business number (ABN) 37125864023
8	Member account number ROBPAT00004A
€	Unique Superannuation Identifier (USI) (if known)

_					
S	ection C: Contribution details				
10	Personal contribution details				
	Is this notice varying an earlier notice? No X	1			
	If you answered 'No' complete the Original Notice to Claim a	Tax Deduction section b	pelow.		
	if you answered feel complete the Variation of previous valid	d notice of intent section	below.		
	ORIGINAL NOTICE TO CLAIM A TAX DEDUCTION				
11	Financial year ended 30 June 20 18				
12	My personal contributions to this fund in the above	financial year	\$ 25000.00		
13			\$ 25000.00		
Se	ection D: Declaration	, , , , , , , , , , , , , , , , , , ,			
	s form has a declaration where you say the information in it is corn the declaration. If you provide false or misleading information, o alties imposed by taxation law.	rect and complete. Please r fail to take reasonable ca	e review the information before you are, you may be liable to administrativ		
	INTENTION TO CLAIM A TAX DEDUCTION				
	Complete this declaration if you have not previously lodged a valid notice with your super fund for these contributions.				
	I declare that at the time of lodging this notice: I intend to claim the personal contributions stated as a tax deduction I am a current member of the identified super fund the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions I have not included any of the contributions in an earlier valid notice.	that at the time of lodging this notice: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging this notice at the earlier of either: If declare that I am lodging thi			
	Name (Print in BLOCK LETTERS)				
	PATRICIA ROBINSON				
	Signature		Date		
r 	L Cee		30/06/2018		
sup	Send your completed notice to your super fund. Do not send i per fund. We don't collect this information; we only provide a form VARIATION OF PREVIOUS VALID NOTICE OF INTEN	lat for you to provide the i	n this notice is for you and your nformation to your super fund.		
14	Financial year ended 30 June 20				
15	My personal contributions to this fund in the above f	inancial year	\$		
	The amount of these personal contributions claimed of intent		Ψ		
17	The amount of these personal contributions I will no deduction	w be claiming as a ta	× \$		

Declaration

This form has a declaration where you sign to indicate that the information in it is correct and complete. Please review the information before you sign the declaration. If you provide false or misleading information, or fail to take reasonable care, you may be liable to administrative penalties imposed by taxation law.

Omplete this declaration if you have already lodged a valid notice with your fund for these contributions and you wish to reduce the amount stated in that notice.

VARIATION OF PREVIOUS VALID NOTICE OF INTENT

I declare that at the time of lodging this notice:

- I intend to claim the personal contributions stated as a tax deduction
- I am a current member of the identified super fund
- the identified super fund currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part on these contributions.

I declare that I wish to vary my previous valid notice for these contributions by **reducing** the amount I advised in my previous notice and I confirm that either:

I have lodged my income tax return for the year in which the contribution was made, prior to the end of the following income year, and this variation notice is being lodged before the end of the day on which the return was lodged, or

- I have not yet lodged my income tax return for the relevant year and this variation notice is being lodged on or before 30 June in the financial year following the year in which the personal contributions were made, or
- the ATO has disallowed my claim for a deduction for the relevant year and this notice reduces the amount stated in my previous valid notice by the amount that has been disallowed.

I declare that the information given on this notice is correct and complete.

gnature	
	Date

Send your completed variation notice to your super fund. **Do not send it to us.** The information on this notice is for you and your super fund. We don't collect this information; we only provide a format for you to provide the information to your super fund.