

SUPERANNUATION FUND : MEMBER APPLICATION

To The Trustee of THE LYN DAVEY

SUPERANNUATION FUND

I, Lyn Patricia DAVEY

Occupation Company Director Date of Birth: 30.9.61

Of (address) 40 Monds Lane,
Picton, NSW, 2571.

hereby apply for membership of the above Superannuation Fund and agree to be bound by and conform to the Rules of the said Fund, and confirm that I have been provided with a copy of the Deed and Rules of the said Fund. If I am an Employee, I Nominate the above Fund to my Employer for the purposes of Superannuation Guarantee Charge Act and award based (if any) contributions on my account.

Employment Status (Employee, Self-Employed, Other) SELF-EMPLOYED MEMBER

Employer (if applic) _____

Employed Since (date commenced with current employer): _____

Tax File Number 133 983 511.

Date: 25-9-2014

SIGNED (applicant):

L Davey.

(OPTIONAL) EMPLOYER'S STATEMENT: I/We, the abovenamed Employer, approve the above Fund Nomination and have given the above employee a copy of this Statement. If an Employer Sponsor in the above Fund, I/We nominate the above employee for membership of the above Fund.

Date:

SIGNED (employer):

TRUSTEE'S RECORD

MEMBER No: 1 Date Recd: 25-9-2014 Date Approved: 25-9-2014

Date the Member was given the "Advice to New Members" Statement: 25-9-2014

Signature(s) of or on behalf of Trustee: