

J & K INVESTMENTS SUPERANNUATION FUND

APPLICATION FOR MEMBERSHIP

To: The Trustees
J & K Investments Superannuation Fund

Key SW
1/98 BOWER ROAD, SEMAPHORE PARK SA 5019
I, **JASON RICHARD WHITE** of ~~Unit 3/41 Military Road, Semaphore South SA 5019~~ declare that I have received sufficient information from the Trustees to enable me to make an informed decision about joining the J & K Investments Superannuation Fund (**Fund**).

I hereby apply to join the Fund and I authorise my employer to make any contributions as and when due, in accordance with the Trust Deed establishing the Fund.

I also agree and undertake the following:

1. I will be bound by the Trust Deed governing the Fund as it is or may be varied from time to time.
2. I understand the terms and conditions of the Trust Deed, in particular the terms relating to the benefits payable.
3. I consent to act as a Trustee of the Fund for the purposes of complying with the Self-Managed Superannuation Fund requirements.
4. I will upon request make full disclosure in writing of any benefits I have received, may receive, or may be entitled to receive from any other Superannuation Fund, Approved Deposit Fund, Rollover Annuity or Employer.
5. I will notify the Trustees if at any time I cease to be gainfully employed as defined in the Trust Deed.
6. I consent to the current Trustees acting as Trustees of the Fund.
7. I declare that the information completed below regarding nominated dependants (if any) is accurate in every respect.
8. I declare that in completing this application for membership I was given written advice regarding the benefits that I would become entitled to upon joining the Fund, the method of determining that entitlement and the conditions relating to those benefits.
9. I declare that I have been provided with a copy of the most recent report to members and details of fund earnings rates to the membership class of which I belong.



I am aware that in the event of my death while a member of the Fund the benefit provided under the Deed is payable at the Trustees' discretion to one or more of my dependents, or where I have no dependents, to my estate.

In such an event, it is my wish that the benefit be paid to the persons nominated below in the proportions shown.

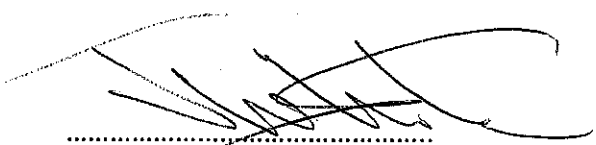
Name: KARINA ASHER
Address: 1/98 BOWER ROAD
SEMAPHORE PARK

Relationship: PARTNER
% 100

Name:
Address: 5019

Relationship:
%

Dated 12/9/2022



JASON RICHARD WHITE