NON-LAPSING BINDING DEATH BENEFIT NOMINATION OF LORNA SYLVIA GREENWOOD



SUPERANNUATION FUND

This Non-Lapsing Binding Death Benefit Nomination of LORNA SYLVIA GREENWOOD, is in respect of my non-reversionary and accumulation superannuation interests in the GREENWOOD SUPERANNUATION FUND established on 25 May 2004 between FRASER DALTON GREENWOOD and LORNA SYLVIA GREENWOOD as Trustees and LORNA SYLVIA GREENWOOD as Member.

MEMBER DETAILS

Title

Mrs

Full Name

Lorna Greenwood

Full Address

3863 Mount Lindesay Highway, Greenbank in the State of Queensland

Date of Birth

26 November 1934

DEATH BENEFIT ALLOCATION

- 1. I make the following Non-Lapsing Binding Death Benefit Nomination:
 - (a) In the event of my death, I direct the trustee of the GREENWOOD SUPERANNUATION FUND to pay my accumulation and non-reversionary pension superannuation interests in such manner and form as the governing rules of the GREENWOOD SUPERANNUATION FUND provide and the Superannuation Laws allow, in accordance with the following:
 - (i) 100% to my husband, FRASER DALTON GREENWOOD of 3863 Mount Lindesay Highway, Greenbank in the State of Queensland; and
 - (ii) In the event that the beneficiary named in (i) above does not remain alive at the time of my death, then I direct the trustee of the GREENWOOD SUPERANNUATION FUND to pay 100% of my accumulation and non-reversionary superannuation interests to my LEGAL PERSONAL REPRESENTATIVE.

DECLARATION

I am a member of the GREENWOOD SUPERANNUATION FUND. This Non-Lapsing Binding Nomination applies in respect of my accumulation and non-reversionary pension superannuation interests in the GREENWOOD SUPERANNUATION FUND.

I confirm that I understand that:

- if this nomination is valid at the time of my death, the trustee must pay the benefits to the persons and in the manner in which I have directed and if this nomination is not valid or is not received by the Trustee, my death benefit may be paid at the Trustee's discretion;
- this nomination will not lapse and will continue unless amended or revoked;
- if I cease to be a member of the GREENWOOD SUPERANNUATION FUND, I understand that this nomination ceases to have effect:
- each of the beneficiaries listed above must be my spouse, child, financial dependant, interdependent or the executor of my estate;
- I may cancel this nomination at any time

dower S. Greenwood.
Signed by Lorna Sylvia Greenwood

Dated 5 April 2016.

WITNESS EXECUTION	TION	CU	EXE	ESS	TN	WI
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Witness 1

I witnessed the signing of this nomination by the person whose signature appears above and declare that I am over 18 years of age.

Signed by Witness 1

Dated

5 April 2016.

Full Name

EMILLA MICHELLE O'BRIEN

Address

LUI 8, 100 SILURING TCE, NEWSTEAD QUOCE

Witness 2

I witnessed the signing of this nomination by the person whose signature appears above and declare that I am over 18 years of age.

Signed by Witness 2

E. Fricker

Dated

5 APRIL 2016

Full Name

ELISE FRICKER

Address

1454 LOGAN RD MT GRAVATT 4122