

Application to become a Member

This Application Form contains your Death Benefit Nomination and undertakings which must be made by you. It is also accompanied by the Product Disclosure Statement relevant to the fund contained in Annexure A.

Part 1 Application and undertakings

- I apply to become an initial member of this fund under the trust deed.
- I make each of the following undertakings:
 - I am not in an employment relationship with another member.
 - I am not a disqualified person under superannuation law from being a trustee of the fund.
 - I will comply with the trust deed.
 - Upon request, I will fully disclose in writing any information required by the trustee in respect of my membership of the fund. This includes disclosing:
 - Any circumstance which may lead to my entering into an employment relationship with any other member of the fund who is not also a relative of mine.
 - That I may become disqualified under superannuation law from being a trustee of the fund.
 - Any information in relation to my medical condition.
- I will act as a trustee of the fund.
- I understand the trust deed, particularly its terms concerning the benefits payable under it, and I have read and understood the attached Product Disclosure Statement, annexed and marked 'A'.
- I have read and understand the prescribed information relating to the collection of Tax File Numbers by the trustees of superannuation funds.

I attach a completed ATO Individual Tax File Number Notification form.

Applicant name	Miki Cristina Stirbinskis
Applicant address	138 Herdsman Parade, Wembley WA 6014
Applicant occupation	Registered Nurse
Date of birth	16 August 1974
Applicant place of birth	Torrelavega Spain

Part 3 Provision of member's tax file number to regulated superannuation fund

To the trustees of the J & M Superannuation Fund.

I have been informed of the reasons why my TFN is sought by the fund.

My TFN is 182675901.

Date: 6th March 2008

Signed: 

Miki Cristina Stibinskis
