# Munsie Superannuation Fund

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## **Death Benefit Rule**

By Member

# **Althea Lindley Munsie**

(Member)

# Munsie Nominees Pty Ltd ACN 125 116 494

(Trustee)

In accordance with section 59(1) of the Superannuation Industry (Supervision) Act (SISA) and Regulations and pursuant to Rule 16.1 of the Trust Deed:

I, Althea Lindley Munsie of 7 Aztec Island Retreat HALLS HEAD WA 6210 request the trustee of Munsie Superannuation Fund to establish a Death Benefit Rule as detailed below:

### 1) Revoking previous Death Benefit Nominations

I hereby revoke all previous Death Benefit Nominations whether Binding or Non-Binding on the Trustee.

### 2) Particulars of my Beneficiaries

In this Death Benefit Rule the expression;

"my spouse" means Selby Walter Munsie.

### 3) Payment of Benefits

In the event of my death, in accordance with Rule 53.4, pay my Benefits in the following manner:

- a) At the discretion of my spouse distribute my Benefits to either:
  - my spouse, who at his discretion and subject to the Superannuation Industry (Supervision) Act and Regulations, elect to receive the benefits as either a Lump Sum Benefit or a Pension Benefit or a combination of both; or
  - ii) the executor of my estate; or
  - iii) any combination of the above.
- b) In the event that my spouse predeceases me distribute my Benefits to the executor of my estate.

### 4) Death Benefit Rule Binding on Trustee

To avoid any doubt, unless otherwise revoked by me in writing in accordance with Rule 16.3, and subject to acceptance by the Trustee in accordance with Rule 16.2, this Death Benefit Rule will not lapse and is binding on the trustee of Munsie Superannuation Fund.

#### 5) Trustee to Consult

Upon my death, I direct the trustee to seek the advice of Optimus or another appropriately appointed SMSF Specialist Advisor in relation to the distribution of my Superannuation Benefits. In addition, my beneficiaries and/or Executor, where discretion is provided, should also seek the advice of Optimus or another appropriately appointed SMSF Specialist Advisor prior to exercising their discretion in relation to the receipt of Death Benefits.

#### Divorce/Separation

I confirm that in the event of divorce/separation from my spouse, distribute my benefits to:

a) the executor of my estate.

#### 7) Variation by Legal Personal Representative

Despite Rule 16.3 of the Fund's Trust Deed, I do not permit my Legal Personal Representative to amend this Death Benefit Rule. I also confirm that despite Rule 57.1(c) I do not permit my Legal Representative to provide written consent to amend the Deed or the Rules which will amend the terms of a Pension which has been incorporated as a Rule or Death Benefit Rule.

ALTHER MUNSIE

1st Witness

2<sup>nd</sup> Witness

#### Members Declaration

Signed in presence of two witnesses

Witnesses' Details

We declare that this statement was signed and dated in our presence. We are over the age of 18 years, and are not nominated in this notice as potential beneficiaries.

1st Witness

2<sup>nd</sup> Witness

RAUPH COLLUM Full Name: SAMES

Address: 9 AZTEC IS

Occupation:

Full Name: JUNIA FRANCIES

All nominations received and accepted by the Trustee are valid until revoked.

# Munsie Superannuation Fund

## **Death Benefit Rule**

By Member

# **Selby Walter Munsie**

(Member)

# Munsie Nominees Pty Ltd ACN 125 116 494

(Trustee)

In accordance with section 59(1) of the Superannuation Industry (Supervision) Act (SISA) and Regulations and pursuant to Rule 16.1 of the Trust Deed:

I, Selby Walter Munsie of 7 Aztec Island Retreat HALLS HEAD WA 6210 request the trustee of Munsie Superannuation Fund to establish a Death Benefit Rule as detailed below:

## 1) Revoking previous Death Benefit Nominations

I hereby revoke all previous Death Benefit Nominations whether Binding or Non-Binding on the Trustee.

### 2) Particulars of my Beneficiaries

In this Death Benefit Rule the expression;

"my spouse" means Althea Lindley Munsie.

### 3) Payment of Benefits

In the event of my death, in accordance with Rule 53.4, pay my Benefits in the following manner:

- a) At the discretion of my spouse distribute my Benefits to either:
  - my spouse, who at her discretion and subject to the Superannuation Industry (Supervision) Act and Regulations, elect to receive the benefits as either a Lump Sum Benefit or a Pension Benefit or a combination of both; or
  - ii) the executor of my estate; or
  - iii) any combination of the above.
- b) In the event that my spouse predeceases me distribute my Benefits to the executor of my estate.

### Death Benefit Rule Binding on Trustee

To avoid any doubt, unless otherwise revoked by me in writing in accordance with Rule 16.3, and subject to acceptance by the Trustee in accordance with Rule 16.2, this Death Benefit Rule will not lapse and is binding on the trustee of Munsie Superannuation Fund.

### 5) Trustee to Consult

Upon my death, I direct the trustee to seek the advice of Optimus or another appropriately appointed SMSF Specialist Advisor in relation to the distribution of my Superannuation Benefits. In addition, my beneficiaries and/or Executor, where discretion is provided, should also seek the advice of Optimus or another appropriately appointed SMSF Specialist Advisor prior to exercising their discretion in relation to the receipt of Death Benefits.

### 6) Divorce/Separation

I confirm that in the event of divorce/separation from my spouse, distribute my benefits to:

a) the executor of my estate.

## 7) Variation by Legal Personal Representative

Despite Rule 16.3 of the Fund's Trust Deed, I do not permit my Legal Personal Representative to amend this Death Benefit Rule. I also confirm that despite Rule 57.1(c) I do not permit my Legal Representative to provide written consent to amend the Deed or the Rules which will amend the terms of a Pension which has been incorporated as a Rule or Death Benefit Rule.

SELBY WALTER MUNSIE

1st Witness

2<sup>nd</sup> Witness

Members Declaration	
Such curie	8/4/2008
Selby Walter Munsie	Date
Signed in presence of two witnesses	
Witnesses' Details We declare that this statement was signed and dated in comminated in this notice as potential beneficiaries.	our presence. We are over the age of 18 years, and are not
1st Witness	2 <sup>nd</sup> Witness
(usual signature)	(usual signature)
Full Name: SAMES RACH	Full Name SOLIA FRANCES RAWH
Address: 9 AZTEC IS RTT-HAUS	HEADAddress: a AZTEC IS RTT-HAUS HER
Occupation: WA 6210	Occupation: WA 6210

All nominations received and accepted by the Trustee are valid until revoked.

RETIRED.

Occupation: