

Application for Membership

Col Sheppard Superannuation Fund

Member details	
Name:	Garry Robert Sheppard
Address:	32 See Street, Bargara, QLD 4670
Date of Birth	23/02/1970

I hereby apply to become a member of Col Sheppard Superannuation Fund

I understand that my membership is subject to terms and conditions specified in the Trust Deed governing the Fund.



 SIGNATURE

10-07-2006

 DATED

Employer details (Optional)
Employer:
Address:

Nomination of dependants (Optional)

Important information for completion
<p>1. This Nomination Notice is not binding. The Trustee/s will take it into account in the event that a benefit is paid from the Fund on your death. However, the Trustee/s have complete discretion as to which of your Dependants and/or Legal Personal Representative may receive the benefit and in what proportions. If there are no Dependants or Legal Personal Representative, the benefit may be payable to any other person.</p> <p>2. This Nomination Notice must be fully completed in accordance with the details below: Ensure both pages of this Notice are completed. The Beneficiaries named in this Notice must be Dependants and/or your Legal Personal Representative. Your Dependants are your spouse, de facto spouse and your children (including step, adopted and ex-nuptial children), and any other person financially dependent upon you at the time of your death. Your Legal Personal Representative is either the person named as your executor in your will, or, if you do not have a valid will at the date of your death, the person who, as your next of kin, applies for and has been granted letters of administration for your estate. Should you wish to nominate your legal personal representative, please write 'Legal Personal Representative' as the name of the Beneficiary. For each person nominated, you must provide both their relationships to you and the proportion of any benefit that is to be paid to each.</p>

Nomination of dependants (Optional)		
Name	Relationship to you	Proportion of benefit

Member declaration

I, **Garry Robert Sheppard** of **32 See Street, Bargara, QLD 4670** as a member of the Fund, request the Trustee/s to pay my death benefit to the above persons in the proportions shown.

I understand that:
 in the event of my death, the Trustee/s have complete discretion as to which of my dependants and/or estate will receive any death benefit payable.
 this Notice revokes and amends any previous notice supplied to the Trustee/s of the Fund in regard to my nominated beneficiaries.



 SIGNATURE

9/8/06

 DATED

Trustee Consent Form

Col Sheppard Superannuation Fund

I/We : Colin Raymond Sheppard
Garry Robert Sheppard

HEREBY DECLARE THAT

- 1
 - (a) I have never been found guilty of a dishonest conduct offence in Australia or elsewhere.
 - (b) I am not an insolvent under administration under the Bankruptcy Act 1966;
 - (c) I am not disqualified from acting as trustee or as a responsible officer of a trustee company under the Superannuation Industry (Supervision) Act;
 - (d) I have not at any time been prohibited from managing a corporation under State or Federal order; and
 - (e) I have not at any time been convicted of an offence relating to the management of a corporation under the Corporations Act or convicted of an offence involving serious fraud.

- 2 I consent to act as trustee of the Fund

10.07.2006
Date


Signature


Signature

**MINUTES OF MEETING OF TRUSTEES OF
Col Sheppard Superannuation Fund**

HELD AT: **24 Barolin Street
Bundaberg QLD 4670**

ON:

PRESENT: **Colin Raymond Sheppard
Garry Robert Sheppard**

TABLED: Draft trust deed and rules for the proposed superannuation fund.

RESOLVED THAT:

1. With the intention of forming a superannuation fund to provide retirement benefits for Eligible Persons, **Colin Raymond Sheppard, Garry Robert Sheppard**, agree to act as the Trustee/s of the Fund.
2. The Fund would be called the **Col Sheppard Superannuation Fund**
3. The Trustees will execute the draft trust deed tabled at the meeting.
4. *(if Applicable)*The Trustees accept for the purposes of the Fund Rules, the following as an Employer under the terms of the Trust Deed:
5. The Trustee/s will invite the following persons to become members of the Fund and will give them details of the benefits provided under the Rules of the Fund:

Colin Raymond Sheppard

Garry Robert Sheppard
6. The Trustee/s will open a Bank Account in the name of the Fund.
7. The Trustee/s will formulate an Investment Strategy for the Fund and this Strategy will be documented and reviewed on a regular basis.


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(Chairman)