

# **KIKNBAK SUPERANNUATION FUND**

## **Binding Death Benefit Nomination**

made by

**JO-ANNE NICOLE DALBY**

McColm Matsinger Lawyers  
Level 4, 57 The Esplanade  
Maroochydore QLD 4558  
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## **Binding Death Benefit Nomination**

Nomination made by: **JO-ANNE NICOLE DALBY** of 4/1 Poinsettia Court,  
Mooloolaba, Queensland

To: **KIKNBAK PTY LTD ACN 166 187 953** ("the Trustee") as  
trustee of the **KIKNBAK SUPERANNUATION FUND** ("the  
Fund")

I **JO-ANNE NICOLE DALBY** hereby make a Binding Death Benefit Nomination  
("Nomination") as follows:

1. In the event of my death, I hereby direct the Trustee to pay one hundred percent (100%) of any death benefit payable including any insurance policy payouts which are obtained by the Trustee of the Fund in respect of my membership of the Fund, to my husband **BRAD JOSEPH DALBY** PROVIDED THAT if he fails to survive me then to my **LEGAL PERSONAL REPRESENTATIVE/S** for distribution in accordance with the provisions of my Will.
2. This Binding Nomination is pursuant to clauses 34.1 and 34.2 of the **KIKNBAK SUPERANNUATION FUND TRUST DEED** made on the 17<sup>th</sup> October, 2013 and subject to any reversionary pension that may exist at the time of my death with the intent that the provisions of any existing valid reversionary pension that would otherwise continue in the event of my death. For the purposes of clarity I state that:-
  - (a) the provisions of this Binding Death Benefit Nomination shall not cancel the operation of any valid reversionary pension; and
  - (b) this Binding Death Benefit Nomination shall apply only to death benefits that are not subject to a continuing residuary pension.
3. I hereby direct that this notice revokes any previous notice (binding or non-binding) I may have made in relation to my benefits in the Fund.
4. I acknowledge that unless amended or withdrawn earlier, this Nomination is binding on the Trustees for an indefinite term.
5. I acknowledge I can amend or revoke this Nomination at any time by lodging a new signed and dated Nomination to the Trustees.
6. I acknowledge that each of the persons mentioned in this Nomination is my dependant and/or my legal personal representative.
7. I have signed this Nomination in the presence of two witnesses (who are not a nominee on this Binding Death Benefit Nomination) both of whom are over the age of 18.

  
.....  
**JO-ANNE NICOLE DALBY**

.....  
**DATE**

21-2-22

This Nomination was signed by the Member in our presence:

  
.....  
**WITNESS 1**

.....  
**DATE**

21-2-22

  
.....  
**WITNESS 2**

.....  
**DATE**

21-2-22

## Binding Death Benefit Nomination

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### Witness Declarations

#### Declaration of Witness 1:

I, (print name of witness 1) MALCOLM DONALD McCOLM

of (print address) C/- Level 4, 57 The Esplanade, Maroochydore, 4558

declare that:

1. I am a person over 18 years;
2. I am not a person mentioned in this Binding Death Benefit Nomination; and
3. **JO-ANNE NICOLE DALBY** signed this Binding Death Benefit Nomination in my presence and in the presence of the other witness.

.....  
Signature of Witness 1

.....  
Date

21-2-22

#### Declaration of Witness 2:

I, (print name of witness 2) CHLOE ANNE-MAREE ROBINSON

of (print address) C/- Level 4, 57 The Esplanade, Maroochydore, 4558

declare that:

1. I am a person over 18 years;
2. I am not a person mentioned in this Binding Death Benefit Nomination; and
3. **JO-ANNE NICOLE DALBY** signed this Binding Death Benefit Nomination in my presence and in the presence of the other witness.

.....  
Signature of Witness 2

.....  
Date

21-2-22

**KIKNBAK PTY LTD ACN 166 187 953** as trustee of the **KIKNBAK SUPERANNUATION FUND** hereby acknowledges receipt and accepts the within Binding Death Benefit Nomination.

DATED this 21<sup>st</sup> day of February 2022.

.....  
Director - **BRAD JOSEPH DALBY**

.....  
Director - **JO-ANNE NICOLE DALBY**