

# Self-Managed Super Fund Audit Request



Name of Fund: WT & GM Bennett Fund  
 Fund ABN: 18 668 048 524  
 Accountant / Administrator: **Shelley Conder**  
 Email: **shelley@cleave.com.au** Phone: **(07) 3359 3311**  
 Address: **PO Box 432, BANYO QLD 4014**

Audit Period: **Financial Year Ended 30 June 2018**

Are all members either directors of the Trustee Company or trustees of the fund?  Yes  No  
 Have there been any known breaches of the SIS Act during the audit period?  Yes  No

Notes: \_\_\_\_\_

Does the fund have any "in house"/related party assets?  
 If yes are the assets pre-99?  Yes  No  
 Yes  No

Notes: \_\_\_\_\_

## Financial Audit

	YES	NO	N/A	Notes	S/R
Current Year Fund Financial Statements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SF360	
Current Year Fund General Ledger Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SF360	
Current Year Fund Income Tax Return	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
Member Information Statements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SF360	
Fund Trial Balance & Working Papers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SF360	
Bank Statements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
Invoices / Receipts evidencing payments	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
Fund Share Dividend Statements (if applicable)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
Fund Share Buy / Sell Contracts (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Fund Term Deposit Statements (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Fund Managed Fund Statements (if applicable)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
Fund Rental Statements (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Title Deed for Property	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Contribution Confirmations / s290-170 letter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SF360	
Work Test Declaration (if over 65)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
Valuations from Independent parties (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Unit Trust Financial Statements	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Life Insurance policy documents (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Collectables / Artwork documents & Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	

## Compliance Audit

Fund Trust Deed & Amendments (if not previously provided)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Fund Investment Strategy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Fund Minutes of Meetings of Trustees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SF360	Y
ASIC Statement of corporate trustee (if applicable)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
Bare Trust Documentation (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

## Pension / Benefits YES / NO - N/A

Copy of request from member to receive benefits/pension	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	
Annual Pension Letter – 2018 year	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
Actuarial Certificate (if required)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	
PAYG Summary /ETP Summary	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Data File	

## Signed Documents (Returned to Auditor)

Auditor Engagement Letter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SF360	Y
Trustee Representation Letter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data File	Y
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		