

# FAX COVER SHEET

Michael and Theresa Roth  
 46 Sylvan Ridge Drive  
 Illawong NSW 2234 Australia  
 Phone: 9543 5397  
 Fax: 9543 2935

Send to: SUPER user	From: MICHAEL ROTH
Attention: RAMW	Date: 4/9/09
Office location: KURSTON	Office location:
Fax number: 8456 5904	Phone number:

Urgent  
  Reply ASAP  
  Please comment  
  Please review  
  For your information

Total pages, including cover: 7

**Comments:**

AS DISCUSSED  
 FOR YOUR RECORDS  
 REGARDS  
 Michael Roth

# **Superannuation Trust Deed for a Self-Managed Fund**

for

---

## **Theresa and Michael Roth Super Fund**

---

SuperHelp Australia Pty. Ltd.

PO BOX 208  
Hurstville BC NSW 1481  
Tel: 1 300 736 453  
Fax: 02 9882 0993  
info@superhelp.com.au  
www.superhelp.com.au

Maddocks  
Level 7  
140 William Street  
Melbourne VIC 3000  
Tel: 03 9288 0555  
Fax: 03 9288 0666  
geoff.musgrove@maddocks.com.au  
www.maddocks.com.au

## Application to become a Member

This Application Form contains your Death Benefit Nomination and undertaking 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 disqualified 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.
- 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	Theresa Ellen Roth
Applicant address	46 Sylvan Ridge Drive, Illawong NSW 2234, Australia
Applicant occupation	Parole Officer
Date of Birth:	14 July 1942
Applicant place of birth:	Sydney, Australia

**Part 2 Death benefit: beneficiary nomination**

This is a binding death benefit notice. By completing and signing it you are requiring the trustee to provide any benefit payable on or after the Applicant's death to the person or persons you mentioned in this notice, being one or more of the Applicant's dependants or the Applicant's legal personal representative.

I direct the trustees that the person named in the following table is to receive the proportions specified in that table of the benefit that is payable if I die.

Person	Relationship to member	Proportion of death benefit
Michael Roth	Husband	100%

Date: 1.7. 2005 Signed by the applicant: *Theresa Roth*  
Theresa Ellen Roth

Witness: *Susan Hultner* Name: Susan Hultner

## Application to become a Member

This Application Form contains your Death Benefit Nomination and undertaking 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 disqualified 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.
- 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	Michael Roth
Applicant address	46 Sylvan Ridge Drive, Illawong NSW 2234, Australia
Applicant occupation	Parole Officer
Date of Birth:	20 June 1944
Applicant place of birth:	Iglau, Czechoslovakia

**Part 2 Death benefit: beneficiary nomination**

This is a binding death benefit notice. By completing and signing it you are requiring the trustee to provide any benefit payable on or after the Applicant's death to the person or persons you mentioned in this notice, being one or more of the Applicant's dependants or the Applicant's legal personal representative.

I direct the trustees that the person named in the following table is to receive the proportions specified in that table of the benefit that is payable if I die.

Person	Relationship to member	Proportion of death benefit
Theresa Roth	Wife	100%

Date: 1.7. 2005 Signed by the applicant: *Michael Roth*  
Michael Roth

Witness: *Susan Hultner* Name: Susan Hultner

**Execution**

Executed as a deed.

Dated: 1st July 2005

Signed sealed and delivered by  
Michael Roth  
in the capacity of trustee in the presence of:

Susan Hultner  
Signature of witness

Michael Roth  
Signature of individual

Susan Hultner  
Name of witness (please print)

Signed sealed and delivered by  
Theresa Ellen Roth  
in the capacity of trustee in the presence of:

Susan Hultner  
Signature of witness

Theresa Roth  
Signature of individual

Susan Hultner  
Name of witness (please print)

### Application to become a Member

This Application Form contains your Death Benefit Nomination and undertaking 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 disqualified 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.
- 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	Theresa Ellen Roth
Applicant address	46 Sylvan Ridge Drive, Illawong NSW 2234, Australia
Applicant occupation	Parole Officer
Date of Birth:	14 July 1942
Applicant place of birth:	Sydney, Australia