## APPLICATION FOR MEMBERSHIP

## of **Millar Family Super Fund**

Full Name:	Neville James MILLAR					
Address:	4 Guardian Parade Beacon Hill NSW 2100					
Occupation:-	Company Director					
Date of Birth:	17/7/1958	Sex:	Male			
<ul> <li>I have been actermination of</li> <li>In considerati provisions of and I am not benefits from a</li> </ul>	on of my admission to the Trust Deed governing a member of any other any such fund, other tha	which I am entitled to yer. o membership, I her ig the Fund and I dec superannuation fund in the following:-	receive from the Fund of eby agree to abide by a lare that I am not entitled or approved deposit fun	and be bound by the I to a deferred annuity Id nor have I received		
time agreed upon the Complete of the Applicant of the number number for the pur NOMINATION COMINATION COMINATI	by myself and my emplo tible)  r is  poses of administering t  DF BENEFICIARIES:	yer as contributions to	lary such amounts (if and be made by me to the algorithm and the made by me to the algorithm.  Trustement of my benefits.	e(s) to use this tax file		
Name and	d Address		Relationship to Member	Proportion of benefit		
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N)	Mulk cant/Member	Witness 1	With	ess 2		
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## APPLICATION FOR MEMBERSHIP

## of **Millar Family Super Fund**

Full Name:	Dianne Therese MILLAR					
Address:	4 Guardian Parade Beacon Hill NSW 2100					
Occupation:-	Company Director	r				
Date of Birth:	01/4/1965	Sex:	Female			
<ul> <li>I have been adtermination of s</li> <li>In consideration provisions of the and I am not a</li> </ul>	service with my Employn of my admission to the Trust Deed governing member of any other the such fund, other the	which I am entitled byer. to membership, I h ng the Fund and I d r superannuation fur	to receive from the Fundereby agree to abide beclare that I am not entited or approved deposit the second control of the second cont	d on retirement, death or y and be bound by the led to a deferred annuity fund nor have I received		
time agreed upon by (*Delete if not applicab) My tax file number number for the purp NOMINATION O	y myself and my emple le) is poses of administering  F BENEFICIARIES:	oyer as contributions and I the Fund and the pa	s to be made by me to the hereby authorise my Tru yment of my benefits.	any) as are from time to e abovementioned Fund. stee(s) to use this tax file tersons in the proportions		
Name and	Adduses		Relationship	Proportion		
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мильфорогородуний учиний пиничений каналаний	·	при	1,000,000,000	%		
f	Law ant/Member	Witness 1		Witness 2		