

To the Trustee of the Fund DENBOW TRANSPORT PTY LTD SUPERANNUATION FUND.

From: WILTON JOHN BOWDEN of LOT 5 BURNSIDE RD, BEENLEIGH QLD 4207.

*DATE OF BIRTH 22-9-42*

I apply to become a member of the abovementioned superannuation fund on the terms and conditions specified in the Trust Deed from the time being governing the Fund.

I understand that my employer will deduct from my salary such amounts as are required to provide my contributions to the Fund and will pay those amounts to the Trustee of the Fund.

I acknowledge my acceptance of  
DENBOW TRANSPORT PTY. LTD. A.C.N. 053 085 199

as Trustee of the Fund.

Signature. *x WJB W. J. Bowden*

WILTON JOHN BOWDEN

Dated.....

### NOMINATED BENEFICIARY \*

I wish to advise the Trustee of the Fund that my Nominated Beneficiary(ies) under the Fund is/are as follows:

NAME IN FULL (DOB IF UNDER 18)	RELATIONSHIP TO MEMBER	FULL POSTAL ADDRESS	%SHARE OF BENEFIT **
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I understand that the payment of any Death Benefit by the Fund will be at the absolute discretion of the Trustee and that this nomination is not to be treated as a direction.

Signature..... Dated.....

WILTON JOHN BOWDEN

\* Completion of this section is optional

\*\* Show percentage of death benefits to be taken by each beneficiary.