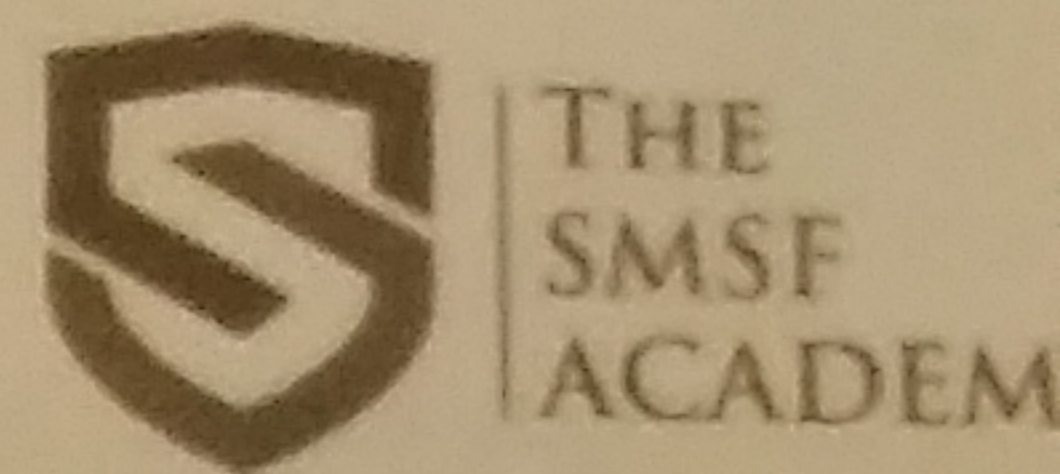


# SMSF Deed Update



This form is to be used to collect information to order SMSF Deed Update online within The SMSF Academy's Campus platform. This document has not been created as a substitute for online submission of an order and will not be accepted in paper form by us to complete on your behalf.

## 1. FUND DETAILS

Fund Name:	Chester Cook SMSF
Contact Name:	Sharon Lok
Postal Address:	4 Bowman St
Daytime Contact No.:	+61 4 1214 1369
Mobile:	Same as above
Email:	sharon.lok@gmail.com (preferred)

## 2. DEED DATES

Date of Original Deed:	8 September 2011
Dates of previous Updates:	N/A

## 3. MINUTES

Address of Meeting:	4 Bowman St, Macquarie, ACT 2614
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## 4. TRUSTEE DETAILS

Trustee Details:	<input type="checkbox"/> Corporate Trustee (Complete Sections 3 & 4) <input checked="" type="checkbox"/> Individual Trustee (Complete Section 5)
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### Existing Company Information

Full Name:	<del>Sharon</del> <sup>St</sup>
Registered Office:	
A.C.N.:	
A.B.N.:	
Incorporation Date:	

### Arrange a new Company

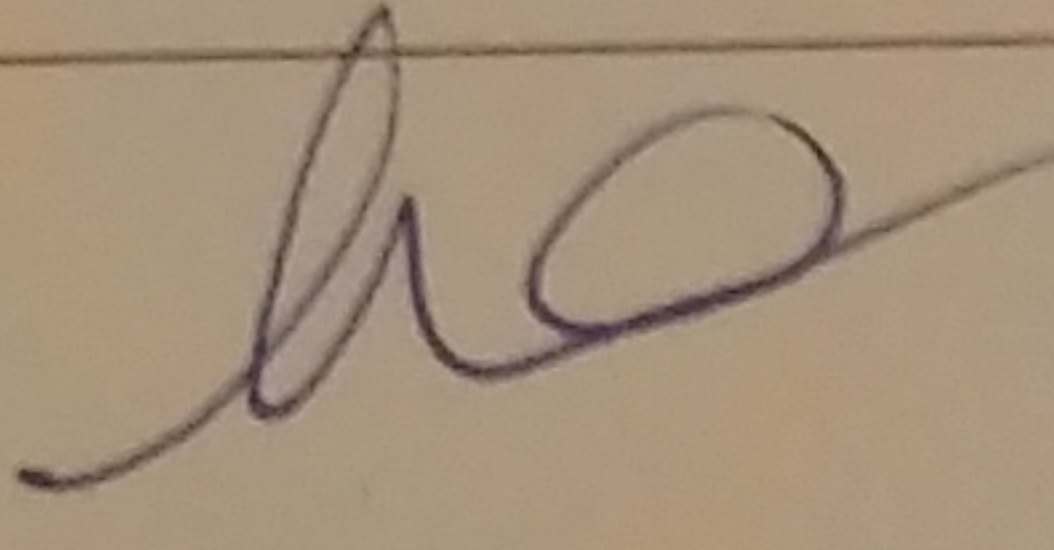
Preferred Name:	
Alternate Name:	
Registered Office:	

**5. MEMBER DETAILS**

	Member 1	Member 2
Surname:	LOK	WICKRAMARIYARATNE
Given Names (in full):	SHARON MEI WAN	TUSHARA
Residential Address:	4 BOWMANST, MACQUARIE ACT 2614	4 BOWMAN, ST, MACQUARIE ACT 2614
Sex:	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
Date of Birth:	3rd April 1980	21st August 1984
Place of Birth:	SINGAPORE	SINGAPORE
Tax File Number:		
Please Indicate:	<input type="checkbox"/> Member <input type="checkbox"/> Individual Trustee <input type="checkbox"/> Trustee Director / Shareholder	<input type="checkbox"/> Member <input type="checkbox"/> Individual Trustee <input type="checkbox"/> Trustee Director / Shareholder
	Member 3	Member 4
Surname:		
Given Names (in full):		
Residential Address:		
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth:		
Place of Birth:		
Tax File Number:		
Please Indicate:	<input type="checkbox"/> Member <input type="checkbox"/> Individual Trustee <input type="checkbox"/> Trustee Director / Shareholder	<input type="checkbox"/> Member <input type="checkbox"/> Individual Trustee <input type="checkbox"/> Trustee Director / Shareholder

**6. CONSENT**

By signing this form you consent to updating the current SMSF Deed and to the terms and fees applicable.

Client Signature:	 SHARON LOK
Date:	2 JUNE 2017