

The Trustees
Mr Terrence Roderick Cubit
1 Yucca Court
Eight Mile Plains

APPLICATION FOR MEMBERSHIP

I, the undersigned person, being eligible, hereby apply for admission to membership of the Superannuation Fund.

I agree and undertake as follows:

1. I will be bound by the Trust Deed governing the Fund as it is presently constituted or as it may be by variation from time to time.
2. I understand the terms and conditions of the Trust Deed including benefits payable to Members and understand my rights and the rights of my dependants pursuant to the Trust Deed.

My personal details are as follows:

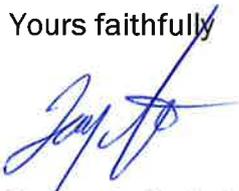
Full Name: Terrence Roderick Cubit
Address: 1 Yucca Court, Eight Mile Plains
Date of Birth: 31 October 1949
Employer: Queensland Thermo King
Date Employment Commenced: 18 August 2003

I hereby acknowledge that the discretion vested in you by the Rules of the Fund is an absolute free and unfettered discretion but I express the wish that in the exercise of such discretion you give consideration to paying any lump sum death benefit in the following proportions:

Name of Designated Beneficiary	Address of Designated Beneficiary	Relationship to Member	Proportion of Lump Sum Death Benefit

Dated: 25 May 2006

Yours faithfully



Terrence Roderick Cubit

The Trustees
Mrs Judith Ann Cubit
1 Yucca Court
Eight Mile Plains

APPLICATION FOR MEMBERSHIP

I, the undersigned person, being eligible, hereby apply for admission to membership of the Superannuation Fund.

I agree and undertake as follows:

1. I will be bound by the Trust Deed governing the Fund as it is presently constituted or as it may be by variation from time to time.
2. I understand the terms and conditions of the Trust Deed including benefits payable to Members and understand my rights and the rights of my dependants pursuant to the Trust Deed.

My personal details are as follows:

Full Name: Judith Ann Cubit
Address: 1 Yucca Court, Eight Mile Plains
Date of Birth: 11 August 1950
Employer: Queensland Thermo King
Date Employment Commenced: 18 August 2003.

I hereby acknowledge that the discretion vested in you by the Rules of the Fund is an absolute free and unfettered discretion but I express the wish that in the exercise of such discretion you give consideration to paying any lump sum death benefit in the following proportions:

Name of Designated Beneficiary	Address of Designated Beneficiary	Relationship to Member	Proportion of Lump Sum Death Benefit

Dated: 25 May 2006.

Yours faithfully



Judith Ann Cubit