

**NORMAN VIVIAN PTY LIMITED SUPERANNUATION FUND
BINDING DEATH BENEFIT NOMINATION [Clause 43-2(e)]
REVERSIONARY BENEFICIARY NOMINATION - MEMBER DETAILS**

Surname: Heathcote
Given Names: Kerrie Lorraine
Residential Address: Unit 6 3 The Ridge Canterbury Vic 3216
Date of Birth: 04/08/1947
Gender: MALE ☐ FEMALE ☒

Reversionary Beneficiary to be Nominated

**Name of Reversionary Beneficiary
(who must be a Dependant¹):** GORDON MICHAEL HEATHCOTE
Relationship to Member: HUSBAND
Date of birth: 18/5/1945
Address of Reversionary Beneficiary: 6/3 THE RIDGE, CANTERBURY VICTORIA 3126

¹A dependant means:

- your spouse (including an opposite or same-sex de facto partner)
- your children (including children over 18, step-children, adopted children, ex-nuptial children, children of a same-sex relationship, children of an opposite or same-sex de facto partner, IVF children and children born under certain surrogacy arrangements)
- anyone financially dependent on you; and
- anyone who, in the opinion of the Trustee, is in an "interdependency relationship" with you. "Interdependency relationship" describes a close personal relationship between two people who live together, where one or both of them provide the other with financial support and domestic support and personal care (or are prevented from living together and providing mutual financial support, domestic support and personal care because one or both suffers from a physical, intellectual, psychiatric or other disability).

Your reversionary beneficiary must be a dependant at the time you nominate them and at the time of your death for the reversion to be valid. Additionally, in the case of a child over 18 years, your pension(s) can only revert if at the time of your death the child is financially dependent on you and not yet 25, or if the child suffers a disability (as defined in legislation). If your pension(s) does revert to a child, it must be paid as a lump sum when the child reaches age 25, unless the child suffers a disability.

Member's Declaration

I apply to the Trustee and request the Trustee change the terms and conditions of my pension(s) to add the person I have nominated on this form as my reversionary beneficiary. I understand that this application is subject to acceptance by the Trustee.

Member's Signature K. L. Heathcote **Date:** 28/9/2015

We the Witnesses confirm and declare that the member signed this nomination in our presence.

Independent Witness (1) Kyoko Bradbury **Witness Name:** KYOKO BRADBURY
(over 18 Years)

Independent Witness (2) ALL **Witness Name:** RYAN COLE
(over 18 Years)

**NORMAN VIVIAN PTY LIMITED SUPERANNUATION FUND
BINDING DEATH BENEFIT NOMINATION [Clause 43-2(c)]
REVERSIONARY BENEFICIARY NOMINATION - MEMBER DETAILS**

Surname: Heathcote
Given Names: Gordon Michael
Residential Address: Unit 6 3 The Ridge Canterbury Vic 3216
Date of Birth: 18/05/1945
Gender: MALE ☐ FEMALE ☐

Reversionary Beneficiary to be Nominated

Name of Reversionary Beneficiary
(who must be a Dependant¹): KERRIE LORRAINE HEATHCOTE
Relationship to Member: WIFE
Date of birth: 4/8/47
Address of Reversionary Beneficiary: 6/3 THE RIDGE CANBERRA VIC 3126

¹A dependant means:

- your spouse (including an opposite or same-sex de facto partner)
- your children (including children over 18, step-children, adopted children, ex-nuptial children, children of a same-sex relationship, children of an opposite or same-sex de facto partner, IVF children and children born under certain surrogacy arrangements)
- anyone financially dependent on you; and
- anyone who, in the opinion of the Trustee, is in an "interdependency relationship" with you. "Interdependency relationship" describes a close personal relationship between two people who live together, where one or both of them provide the other with financial support and domestic support and personal care (or are prevented from living together and providing mutual financial support, domestic support and personal care because one or both suffers from a physical, intellectual, psychiatric or other disability).

Your reversionary beneficiary must be a dependant at the time you nominate them and at the time of your death for the reversion to be valid. Additionally, in the case of a child over 18 years, your pension(s) can only revert if at the time of your death the child is financially dependent on you and not yet 25, or if the child suffers a disability (as defined in legislation). If your pension(s) does revert to a child, it must be paid as a lump sum when the child reaches age 25, unless the child suffers a disability.

Member's Declaration

I apply to the Trustee and request the Trustee change the terms and conditions of my pension(s) to add the person I have nominated on this form as my reversionary beneficiary. I understand that this application is subject to acceptance by the Trustee.

Member's Signature [Signature] **Date:** 28/09/2015

We the Witnesses confirm and declare that the member signed this nomination in our presence.

Independent Witness (1) [Signature] **Witness Name:** KYOKO BRADBURY
(over 18 Years)

Independent Witness (2) [Signature] **Witness Name:** RYAN COLE
(over 18 Years)

**NORMAN VIVIAN PTY LIMITED SUPERANNUATION FUND
BINDING DEATH NOMINATION**

TO: Norman Vivian Pty Ltd ACN 000 851 810 (The Trustee)
I, Kerrie Lorraine Heathcote
of Unit 6 3 The Ridge Canterbury Vic 3126

being a Member/*Pensioner (*delete one) of the above superannuation fund hereby nominate the person(s) listed below **as my Nominated Beneficiaries to whom any Benefits to which I am entitled as at my death must be paid:

Beneficiary Nomination

NAME AND ADDRESS OF DEPENDANT(S)	RELATIONSHIP	BENEFIT (Amount or percentage of total Benefit)
GORDON MICHAEL HEATHCOTE TOWNHOUSE 6/3 THE RIDGE CANTEBURY VIC 3126	HUSBAND	100%

*** It is important that you only nominate people to whom superannuation law permits the trustee to pay benefits. Refer to the definition of Dependant in the trust deed. You may also nominate your legal personal representative (i.e. the executor or administrator of your estate upon your death)*

Appointing Contingent Beneficiaries

NAME AND ADDRESS OF DEPENDANT(S)	RELATIONSHIP	BENEFIT (Amount or percentage of total Benefit)
SIMON BROOK HEATHCOTE UNIT 31/8-18 MCINTYRE STREET GORDON N.S.W. 2072	SON	100%

I understand that this nomination expires when revoked or amended by me.

I revoke all former binding death benefit nominations I have made (if any) in respect of my membership in the Fund and declare this to be my last binding death benefit notice.

SIGNED: [Signature] DATED: 28/10/2014

WITNESS DECLARATION

I hereby declare that:

1. I have not been nominated as a Beneficiary pursuant to this instrument.
2. This instrument was executed in my presence.

Name of witness: RYAN COLE

SIGNED: [Signature] DATED: 28/10/2014

WITNESS DECLARATION

I hereby declare that:

1. I have not been nominated as a Beneficiary pursuant to this instrument.
2. This instrument was executed in my presence.

Name of witness: ALAN W. COCKBILL

SIGNED: [Signature] DATED: 28/10/2014

**NORMAN VIVIAN PTY LIMITED SUPERANNUATION FUND
BINDING DEATH NOMINATION**

TO: Norman Vivian Pty Ltd ACN 000 851 810 (The Trustee)
I, Gordon Heathcote
of Unit 6 3 The Ridge Canterbury Vic 3126

being a Member/*Pensioner (*delete one) of the above superannuation fund hereby nominate the person(s) listed below **as my Nominated Beneficiaries to whom any Benefits to which I am entitled as at my death must be paid:

Beneficiary Nomination

NAME AND ADDRESS OF DEPENDANT(S)	RELATIONSHIP	BENEFIT (Amount or percentage of total Benefit)
KERRIE LORRAINE HEATHCOTE TOWNHOUSE 6/3 THE RIDGE CANBERRA VIC 3126	WIFE	100%

*** It is important that you only nominate people to whom superannuation law permits the trustee to pay benefits. Refer to the definition of Dependant in the trust deed. You may also nominate your legal personal representative (i.e. the executor or administrator of your estate upon your death)*

Appointing Contingent Beneficiaries

NAME AND ADDRESS OF DEPENDANT(S)	RELATIONSHIP	BENEFIT (Amount or percentage of total Benefit)
SIMON BRENT HEATHCOTE UNIT 31/8-18 MCINTYRE STREET GORDON N.S.W. 2072	SON	100%

I understand that this nomination expires when revoked or amended by me.

I revoke all former binding death benefit nominations I have made (if any) in respect of my membership in the Fund and declare this to be my last binding death benefit notice.

SIGNED:  DATED: 28/10/2014

WITNESS DECLARATION

I hereby declare that:

1. I have not been nominated as a Beneficiary pursuant to this instrument.
2. This instrument was executed in my presence.

Name of witness: RYAN COLE

SIGNED:  DATED: 28/10/2014

WITNESS DECLARATION

I hereby declare that:

1. I have not been nominated as a Beneficiary pursuant to this instrument.
2. This instrument was executed in my presence.

Name of witness: ALAN W. COCKSILL

SIGNED:  DATED: 28/10/2014