

**Application for Membership
CONFIDENTIAL**

TO: THE TRUSTEE, FOSTER-ABROOK SUPER FUND

I, JOHN STANLEY FOSTER, apply for membership of the Fund.

- (a) I will be bound by the trust deed governing the Fund as varied from time to time.
- (b) I consent to the Trustee acting as Trustee of the Fund.
- (c) I declare that the information in this application is accurate in every respect.

APPLICATION DETAILS

Name: JOHN STANLEY FOSTER
Address: 5 Evelina Court, Howard Springs NT 0835
Occupation:
Date of birth: 30/03/1961
Tax file number:

NOTE: Your Tax File Number (TFN) is confidential. Before you provide it, you must be told:

- 1. The Fund is authorised to collect your TFN under the *Superannuation Industry (Supervision) Act 1993*.
- 2. If you provide your TFN, it will only be used for lawful purposes. These purposes may change in the future as a result of legislative change.
- 3. It is not an offence not to provide your TFN. However giving your TFN to the Fund will have the following advantages (which may not otherwise apply):
 - (c) The Fund will be able to accept all types of contributions to your account/s.
 - (d) The tax on contributions to your superannuation account/s will not increase.
 - (e) Other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits.
 - (f) It will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.
- 4. If you provide your TFN, the trustee may provide it to:
 - (a) the trustee of another superannuation fund when you transfer your benefits to it, unless you instruct the trustee not to; and
 - (b) the Commissioner of Taxation,but otherwise it will be treated as confidential.

DEATH BENEFIT RECIPIENTS

I nominate the following persons as my preferred recipients of my death benefits:

| SURNAME(S) | GIVEN NAME(S) | RELATIONSHIP | % OF BENEFIT |
|------------|--------------------|--------------|--------------|
| Abrook | Suzanne Karenellen | wife | 100 % |

DATED 2020

DMH10233247 3441-4197-3264v1

Signature 

**Application for Membership
CONFIDENTIAL**

TO: THE TRUSTEE, FOSTER-ABROOK SUPER FUND

I, SUZANNE KARELLEN ABROOK, apply for membership of the Fund.

- (a) I will be bound by the trust deed governing the Fund as varied from time to time.
- (b) I consent to the Trustee acting as Trustee of the Fund.
- (c) I declare that the information in this application is accurate in every respect.

APPLICATION DETAILS

Name: SUZANNE KARELLEN ABROOK
Address: 5 Evelina Court, Howard Springs NT 0835
Occupation:
Date of birth: 30/07/1970
Tax file number:

NOTE: Your Tax File Number (TFN) is confidential. Before you provide it, you must be told:

- 1. The Fund is authorised to collect your TFN under the *Superannuation Industry (Supervision) Act 1993*.
- 2. If you provide your TFN, it will only be used for lawful purposes. These purposes may change in the future as a result of legislative change.
- 3. It is not an offence not to provide your TFN. However giving your TFN to the Fund will have the following advantages (which may not otherwise apply):
 - (a) The Fund will be able to accept all types of contributions to your account/s.
 - (b) The tax on contributions to your superannuation account/s will not increase.
 - (c) Other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits.
 - (d) It will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.
- 4. If you provide your TFN, the trustee may provide it to:
 - (a) the trustee of another superannuation fund when you transfer your benefits to it, unless you instruct the trustee not to; and
 - (b) the Commissioner of Taxation,but otherwise it will be treated as confidential.

DEATH BENEFIT RECIPIENTS

I nominate the following persons as my preferred recipients of my death benefits:

| SURNAME(S) | GIVEN NAME(S) | RELATIONSHIP | % OF BENEFIT |
|------------|---------------|--------------|--------------|
| FOSTER | JOHN STANLEY | HUSBAND | 100 |

DATED 27/7/2020

DMH10233247 3441-4197-3264v1

Signature 