

**RESOLUTION OF THE TRUSTEES OF  
THE EDMONDS SUPERANNUATION FUND ('the Fund')  
MEMBER NOTIFICATION  
OF A BINDING DEATH BENEFIT NOMINATION**

We, the undersigned, being all of the Trustees of the Edmonds Superannuation Fund at the date hereof, pursuant to the Trust Deed of the Fund **RESOLVE:**

**BINDING DEATH  
BENEFIT  
NOMINATION**

That the Trustees consider a Binding Death Benefit Nomination Form from the following member:

Raymond Denis Edmonds

The Trustees noted that Rule 15 entitles a member to submit a Binding Death Benefit Nomination which, to be effective, requires the Trustees to provide the member's entitlements in the Fund to the dependant or dependants or legal personal representative noted in the nomination on or after the member's death.

That the Trustees acknowledge that Raymond Denis Edmonds will be accepted as a member of the fund upon the death of June Beverly Edmonds.

That the Trustees are satisfied that the nomination submitted by the member has been prepared in accordance with Rule 15 of the Fund and the Fund's death benefit policy and that it is a legally valid form.

That the Trustees accept the Binding Death Benefit Nomination from the member and, when the member dies, the Trustees have resolved to ensure, within any possible solvency or superannuation law constraints, to make benefit payments as required under the Binding Death Benefit Nomination form to beneficiaries as requested.

That the Trustees notify the member of the Trustees' acceptance of the member's Binding Death Benefit Nomination.

**SIGNED** this *2ND* day of *SEPTEMBER* 2013

  
**JUNE BEVERLY EDMONDS**

  
**RAYMOND DENIS EDMONDS**

**BINDING DEATH BENEFIT NOMINATION**  
**THE EDMONDS SUPERANNUATION FUND ('the Fund')**

I, Raymond Denis Edmonds of 35/58 Sandford Street, St Lucia Qld 4067 as a member of the Fund, hereby direct the Trustees to pay my benefits in the Fund to the following persons on or after my death and in the proportions indicated below.

Name	Relationship	% Of Benefit
Vicki Helena Davis	Daughter	33 1/3%
Peter Raymond James Edmonds	Son	33 1/3%
Michelle Ann Wirkus	Daughter	33 1/3%

I understand:

- I can amend or revoke this Binding Death Benefit Nomination ('Nomination') at any time by providing a new Nomination to the Trustees, signed and dated by me in the presence of two witnesses who are aged over 18 years or over;
- I will be accepted as a member of the fund upon the death of June Beverly Edmonds;
- Unless amended or revoked earlier, this Nomination is binding on the Trustees for a period of three years from the date it is first signed or last confirmed;
- This Nomination revokes and amends any previous notice supplied to the Trustees of the Fund in regard to my nominated beneficiaries;
- If this Nomination is not correctly completed, it may be invalid;
- If I have nominated persons who are not "dependants" as explained in the Fund's Death Benefit Policy, the direction contained in this Nomination will be void and of no effect and the Trustees will have a discretion as to when the benefit is payable and in what proportion.

I acknowledge that I have been provided with information by the Trustees that enables me to understand my rights to direct the Trustees to pay my Death Benefit in accordance with this Nomination.

Signed

*Edmonds*

Date:

*2<sup>nd</sup> September 2013*

**RAYMOND DENIS EDMONDS**

**Witness Declaration**

We declare that:

- This Nomination was signed by the member in our presence;
- We are aged 18 or more; and
- We are not named as beneficiaries herein.

Witness 1:

*Nanker*

Date:

*2/9/13*

Witness 2:

*[Signature]*

Date:

*2/9/13*

**NOTIFICATION OF ACCEPTANCE OF BINDING DEATH  
BENEFIT NOMINATION FOR  
THE EDMONDS SUPERANNUATION FUND**

**To: Raymond Denis Edmonds**

The Trustees have received your Binding Death Benefit Nomination Form prepared in accordance with Rule 15 and the Fund's death benefit policy. A review has been undertaken in relation to the request with advice sought from an SMSF estate planning expert where required. The Trustees have resolved to accept your Binding Death Benefit Nomination Form.

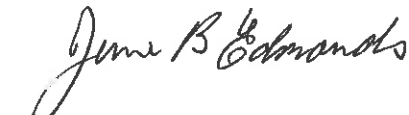
The Trustees reserve the right at the time of death to assess the cash flow requirements that may be faced by the Fund as a consequence of any death benefits becoming payable. The Trustees may make any death benefit payout in such form as the rules and superannuation laws permit with the agreement of the nominated beneficiary.

Your Binding Death Benefit Nomination will remain valid for a period of three years from:

- i. the day when it was first signed by you as the member; or
- ii. the day it was last confirmed or amended by you as the member.

If you wish to amend or revoke your binding death benefit nomination, please provide the Trustees with details in writing of the amendment as soon as possible and ensure that any amendment is prepared in accordance with Rule 15.

SIGNED this *1ND* day of *SEPTEMBER* 2013

  
**JUNE BEVERLY EDMONDS**

  
**RAYMOND DENIS EDMONDS**