

THE TRUSTEES
 A & T BARAKAT SUPER FUND
 5 SEFTON ROAD
 CLAYFIELD QLD 4011

Re: Application For Membership

I, the undersigned person, being eligible, hereby apply for admission to membership of the A & T BARAKAT SUPER FUND

I undertake as follows:

- (i) I will be bound by the Trust Deed governing the Fund as it is presently constituted or as it may be varied from time to time.
- (ii) 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 and those of my employer(s) are attached.

I hereby acknowledge that the discretion vested in you by Rule 12.2 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
KERRIE BARAKAT	5 SEFTON RD CLAYFIELD	WIFE	WHOLE
.....
.....

I understand that the trustee is required to request that I provide my tax file number for the purposes of Section 299F of the Income Tax Assessment Act 1936. I further understand that I am under no obligation to supply this number, but that should I fail to do so, tax may be deducted from my account at the top marginal rate.

My tax file number is: 456-702-549

16th June, 2003

Yours faithfully,

X AB 

ANTHONY BARAKAT

THE TRUSTEES
A & T BARAKAT SUPER FUND
5 SEFTON ROAD
CLAYFIELD QLD 4011

Re: Application For Membership

I, the undersigned person, being eligible, hereby apply for admission to membership of the A & T BARAKAT SUPER FUND

I undertake as follows:

- (i) I will be bound by the Trust Deed governing the Fund as it is presently constituted or as it may be varied from time to time.
- (ii) 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 and those of my employer(s) are attached.

I hereby acknowledge that the discretion vested in you by Rule 12.2 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
ANTHONY BARAKAT	5 SEFTON RD, CLAYFIELD	HUSBAND	WHALE
.....
.....

I understand that the trustee is required to request that I provide my tax file number for the purposes of Section 299F of the Income Tax Assessment Act 1936. I further understand that I am under no obligation to supply this number, but that should I fail to do so, tax may be deducted from my account at the top marginal rate.

My tax file number is: ~~488-383-794~~

16th June, 2003

Yours faithfully,



TERRIE BARAKAT