## PANTHERCORP CST PTY LTD SELF MANAGED SUPERANNUATION FUND BINDING DEATH BENEFIT NOMINATION INSTRUCTION SHEET

MJHC LEGAL

R R

Superannuation · Property · Wills · Commercial

Suite 5 Monash Corporate Centre 750 Blackburn Road Clayton Vic 3168 t: +61 3 9543 5544 All correspondence to: PO Box 412 Mount Waverley Vic 3149 www.mjhclegal.com f: +61 3 9543 5133

Any questions about BDBNs or the completion of this form are to be directed to PantherCorp CST Pty Ltd on (08) 9388-0551

## A. ADVISOR/PERSON ORDERING BDBN PACKAGE:

Enquiries, documents, invoices will be directed to this person, unless otherwise stated								
Pe	erson Ordering:							
Fi	rm Name:							
St	reet Address:							
Sı	uburb/Postcode							
Te	elephone:		Fax:					
Er	mail:			Signat	ture:			
B.	FUND DETAIL	S:						
Fι	und Name:							
W	as the existing trust	deed established or amer	nded by PantherCorp?	Yes	No			
Tł	ne fund rules were es	stablished/amended by Pa	antherCorp on:					
	nless the Fund curren Trustees	tly uses an PantherCorp C	ST Deed, you must forward		of all trust deed documents including c	hanges		
C.		ORMATION:						
ls	the Trustee a compa	any or individuals?	Company		individual			
lf	the Fund Trustee is	a company, enter compar	ny details below					
	ompany Name:				ACN:			
		Individual Trustee or if Co	mpany Trustee, details of	all directors				
			inparty trustee, details of	an uncotors				
1.	Full Name:							
	This person is a:	individual trustee:	director:					
		Present at Meeting	Not Present at	Meeting				
2.	Full Name:							
	This person is a:	individual trustee:	director:					
		Present at Meeting	Not Present at	Meeting				
3.	Full Name:							
	This person is a:	individual trustee:	director:					
		Present at Meeting	Not Present at	Meeting				
4.	Full Name:							
	This person is a:	individual trustee:	director:					
		Present at Meeting	Not Present at	Meeting				
D.	FOR MINUTES	OF MEETING:						
Ме	eting Address:				Address of Member making BDBN unless othe stated	rwise		
Na	me of Chairperson:				Member making BDBN unless otherwise state	d		

If not all Truste	ees/direct	ors were present at	Meeting you <b>r</b>	nust select	one of the	following options:		
	The abser	nt Trustees/directors	s attended by t	telephone:				
	OR Circulation	n Decelutione requir			eteee/dire			
		g Resolutions requir	ed for signatu	re by all Tru	istees/aire	CIOIS:		
E. MUTU	JAL BDBI	N FOR SPOUSES (	OR SINGLE B	DBN:				
Complete separa	ate instructi	Ns only where the Men ion sheet if Members a	re not spouses	or if spouses	have differ	ent requirements.		
In completing this fide domestic rela		eference to <b>spouse</b> inc	ludes a referen	ce to defacto	or domesti	c partner being a per	son with whom the M	lember is in a bona
Mutu	al BDBNs	s for two Members b	eing spouses		BDBN for	one member only		
F. DETA	ILS OF M	IEMBER MAKING 1	THE BDBN:					
Full Name:							DOB:	DD/MM/YYYY
Address:								
		male:	female:					
The Member's	Death Be	nefit Nomination is t	o be:	binding	or	non-binding	on Fund Trustees	
The	Member's	s Death Benefit Noti	ce will:					
	Not lapse	e until the Member r	evokes it in wr	riting, <b>or</b>				
	Lapse af	ter three (3) years, <b>c</b>	or					
	Lapse au	tomatically if the Me	ember separat	es/divorces	spouse			
G. BENE	FICIARIE	ES:						
You should read identify appropria		panying Guide on bind iaries.	ling death bene	fit nominatio	ns to ensure	e that you complete th	his instruction sheet c	correctly and
		eficiaries must either b Supervision) Regulatior					y (Supervision) Act ai	nd the
When a pensic	on is paid	to me, on my death	I want the per	nsion to be t	then paid t	o my surviving spo	ouse Yes	No
1. F	Pay death	benefit to the Memb	per's estate, o	r				
2. F	Pay death	benefit to surviving	spouse but if I	no surviving	g spouse th	nen to the Member	's LPR/estate, <b>or</b>	
3. F	Pay death	benefit to surviving	spouse and th	nen to name	ed Benefici	aries below, <b>or</b>		
4. F	Pay death	benefit to named Be	eneficiaries be	elow.				
lf yo	u have sel	ected either checkbo	ox 3 or 4 you m	ust select o	ne of the fo	ollowing:		
lf na	amed Ben	eficiary does not su	vive the Mem	ber then tha	at share of	the death benefit i	s to be paid:	
	Equally b	etween other surviv	ing named Be	eneficiaries,	or			
	To the M	ember's LPR/estate	, <b>or</b>					
	As deterr	nined by SMSF Tru	stee amongst	eligible sup	erannuatio	on dependants, or		
	To specif	ic Beneficiary/Bene	ficiaries (provi	ide details in	Part H – Ao	ditional Specific Instr	ructions)	
Full Name of s	spouse:						DOB:	DD/11/00/00/
Address of spo	ouse:							DD/MM/YYYY
		male:		female:				Proportion of
<i>If the Member in the address.</i>		ominate their LPR/est	ate, write LPR a	as Beneficiary	/ Name belo	ow and write N/A	Beneficiary's	Total Member's Benefit
Beneficiary N	lame		Address o	of Beneficiar	У		Relationship to Member	Payable to Beneficiary
								%
Beneficiary det	tails continu	le over page						

				%
				%
				%
			Total must equal 100%	100%
If a specific beneficiary is to receive a specific func	l asset, provide details In Par	t H.– Additional Spe	-	10070
<ul> <li>– only required if multiple individual beneficiaries.</li> </ul>				
H. ADDITIONAL SPECIFIC INSTRUCT	IONS:			
If the Member has any addition specific instruct Provide details of alternative Beneficiaries if a share to go to the estate or to be divided equa Provide details If a specific beneficiary to rece	named Beneficiary does i Ily amongst the other nam	not survive the Me ned Beneficiaries.	An additional fee may app	
I. DOCUMENT DELIVERY:				
Prepared documents are to be sent by:	email:	mail:	express post:	
Prepared documents are to be sent by:	email:	mail:	express post: Additional Fees Ap	ply
Prepared documents are to be sent by: J. COMPLETED INSTRUCTIONS:	email:	mail:		ply
		mail:		ply
J. COMPLETED INSTRUCTIONS:				
J. COMPLETED INSTRUCTIONS: Please forward completed instructions to Pant	therCorp CST Pty Ltd: <b>fax:</b> (08) 9388 0551		Additional Fees Ap	
J. COMPLETED INSTRUCTIONS: Please forward completed instructions to Pant email: order@panthercorp.com.au Print and review your instructions and retain printed The Reset button will clear all data in the form.	therCorp CST Pty Ltd: <b>fax:</b> (08) 9388 0551 copy for your file. Adobe Rea	der will not allow yo	Additional Fees Ap mail: PO Box 1725, Subiad bu to save the data in this form.	co WA 6904
J. COMPLETED INSTRUCTIONS: Please forward completed instructions to Pant email: order@panthercorp.com.au Print and review your instructions and retain printed	therCorp CST Pty Ltd: <b>fax:</b> (08) 9388 0551 copy for your file. Adobe Rea erson described in Part A aut	der will not allow yo horises MJHC Lega	Additional Fees Ap mail: PO Box 1725, Subiad bu to save the data in this form. al to prepare the new fund docu	co WA 6904 imentation and agrees
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J. COMPLETED INSTRUCTIONS:         Please forward completed instructions to Panter         email: order@panthercorp.com.au         Print and review your instructions and retain printed         The Reset button will clear all data in the form.         In submitting the completed Instruction Form, the period pay the Fee payable for the new fund. You understand the reset button will clear all data in the form.         K. IMPORTANT INFORMATION:         Meeting & Resolutions         It is not always a legal requirement that individuals print company constitutions permit teleconferencing	therCorp CST Pty Ltd: <b>fax:</b> (08) 9388 0551 copy for your file. Adobe Rea erson described in Part A aut stand that typing/spelling error by sically attend a meeting of . Attendance by telephone c	der will not allow yo horises MJHC Lega 's or incorrect inform trustees or directo an be a convenien	Additional Fees Ap mail: PO Box 1725, Subiad ou to save the data in this form. al to prepare the new fund docu mation given is your responsibili	co WA 6904 Imentation and agrees ty nodern trust deeds
J. COMPLETED INSTRUCTIONS:         Please forward completed instructions to Panter         email: order@panthercorp.com.au         Print and review your instructions and retain printed         The Reset button will clear all data in the form.         In submitting the completed Instruction Form, the period pay the Fee payable for the new fund. You understand the reset button will clear all data in the form.         K. MPORTANT INFORMATION:         Meeting & Resolutions         It is not always a legal requirement that individuals provide the set of the set o	therCorp CST Pty Ltd: <b>fax:</b> (08) 9388 0551 copy for your file. Adobe Rea erson described in Part A aut stand that typing/spelling error ohysically attend a meeting of . Attendance by telephone c was or will be physically pre- ce at a meeting in person or	der will not allow yo horises MJHC Lega 's or incorrect inform trustees or directo an be a convenien sent at a meeting. by telephone. A cii	Additional Fees Ap mail: PO Box 1725, Subiad ou to save the data in this form. al to prepare the new fund docu nation given is your responsibilit rs of a corporate trustee. Most n t method of meeting where par	co WA 6904 Imentation and agrees ty nodern trust deeds ties are physically parties to sign and

Importantly, a circulating resolution does not have any legal effect until the resolution is signed and dated by all required parties. It will also only be effective from the date on which the last signature is obtained to the circulating resolution. For these reasons, physical or telephone attendance at a meeting is preferred over a circulating resolution.

## DISCLAIMER:

MJHC Legal prepares documentation based on your written instructions. MJHC Legal and PantherCorp CST Pty Ltd are not licensed to provide financial product advice. The rules concerning Self Managed Superannuation Funds change and it may be advisable to request specific advice. Liability limited by a scheme approved under Professional Standards Legislation.