



SELF MANAGED SUPERANNUATION FUND INSTRUCTIONS

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IMPORTANT INFORMATION

When providing instruction please note the following points:

1. Self-managed superannuation funds can have a maximum of four (4) members only.
2. All of the members must be all of the trustees or alternatively all of the members must be directors of the corporate trustee of the fund.
3. No person can be a trustee or a director of a trustee company if that person has ever been convicted of dishonesty pursuant to a State or Federal law or even a foreign law. If there appears to be any difficulty in relation to this point please contact Irdi Legal immediately to discuss the matter.

YOUR DETAILS (Block letters)

FIRM	<input type="text"/>				
ADDRESS	<input type="text"/>				
	STATE				P'CODE
CONTACT	<input type="text"/>	PHONE	<input type="text"/>	FAX:	<input type="text"/>
				EMAIL:	<input type="text"/>

FUND DETAILS (Block letters)

TYPE OF FUND	Closed Member Fund	Yes / No
NAME OF FUND	<input type="text"/>	
COMMENCEMENT DATE OF FUND	<input type="text"/>	

TRUSTEE (Block letters)

NAME	<input type="text"/>	
ADDRESS/REGISTERED OFFICE	<input type="text"/>	
ACN (if applicable)	<input type="text"/>	
DIRECTORS (if applicable)	Name	<input type="text"/>
	Name	<input type="text"/>

IF THE MEMBERS ARE TO BE THE TRUSTEES IN PLACE OF A COMPANY TICK THIS BOX

Full Name of Member	Home Address	Date of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

SPECIAL COMMENTS (Attach extra sheet if required)

METHOD OF DELIVERY

<input type="checkbox"/>	Post	<input type="checkbox"/>	Courier (fees will be incurred)	<input type="checkbox"/>	To be collected
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