Grosvenor Pirie

Issued: 1st March 2006
Form No: 660 - 7

GROSVENOR PIRIE MASTER SUPERANNUATION FUND – SERIES 2

Trust Company Superannuation Services Limited

Trustee:
ABN: 49 006 421 638
AFSL: 235153
Trustee No.: L0000635

Fund:
ABN: 32 367 272 075
SPIN: TCS0004AU
Fund Registration No.: R1001204

NOMINATION OF BENEFICARIES FORM

Please print all information in block letters.

1. Member Details:

Print in block letters

Grosvenor Pirie Master Superannuation Fund – Series 2 Member Number (if known)

6 6 0 - - -

Mr Mrs Ms Miss

Surname

First Name

Middle Name

Postal Address (number and street name)

Suburb

State

Postcode

E-mail Address

Telephone Number (daytime)

Mobile Number

Date of Birth

Tax File Number

2. Nomination of beneficiaries

Although I understand the final decision will rest with the Trustee, I wish that any benefit payable out of the Fund in the event of my death, is paid to the beneficiaries in the following proportions:

Full Name of Nominated Beneficiary

Relationship to Member

Portion of Benefit %

Full Name of Nominated Beneficiary

Relationship to Member

Portion of Benefit %

Con't. Nomination of beneficiaries

Full Name of Nominated Beneficiary

Relationship to Member

Portion of Benefit %

Full Name of Nominated Beneficiary

Relationship to Member

Portion of Benefit %

X

Signature of Member

X

Date

Office use only

ID Number

Short Name

Please return completed form to Grosvenor Pirie Management Limited, GPO Box 263, Sydney NSW 2001

Free Call : 1300 366 657 Facsimile : (02) 8354 4900 E-Mail : info@gpml.com.au