

## Self Managed Superannuation Fund Deed Checklist

SELF MANAGED SUPERANNUATION FUND

Name of Fund	
Address (Street, Suburb, State, Postcode & Country)	

MEMBERS

Full Name	(First Name, Middle Name & Last Name)
Member 1	
Member 2	
Member 3	
Member 4	

TRUSTEE

All Members or Company Trustee?	
If Company, Company Name & ACN	

EMPLOYER

Is there an Employer who will contribute to the Fund & be bound by deed? Yes/No	
If Yes, Employer Name (Company Name & ACN or Full Name)	
Employer Address (Street, Suburb, State, Postcode & Country)	

JURISDICTION

<p><b>Jurisdiction to apply to Deed?</b> (Eg ACT, NSW, NT, QLD, SA, VIC or WA)</p>	
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