

Please fax/mail completed instructions to:
Company Creations PO Box 110 Winston Hills NSW 2153

Phone: 1300 302 155
Fax: 1300 302 156

SMSF – UPDATING OF EXISTING DEED

NAME OF FUND:

Date of Original Deed Establishing Fund:

Date(s) of Amending Deeds (if any):

Sponsoring Employer (if any)

ACN #

Registered Office

Directors of Employer Co.

TRUSTEE(S)

ACN #

1. Full Name (ACN if Company)

Address

2. Full Name

Address

3. Full Name

Address

Directors of Trustee Co.
(if applicable)

MEMBER DETAILS

Given Names:

Surname:

Address:

Date of Birth

Occupation:

Sex: M/F

Given Names:

Surname:

Address:

Date of Birth

Occupation

Sex: M/F

Given Names:

Surname:

Address:

Date of Birth

Occupation:

Sex: M/F

Given Names:

Surname:

Address:

Date of Birth

Occupation:

Sex: M/F

CLIENT DETAILS

Your Firm's Name

Contact Name & Phone #

Mail Address

Delivery Address (if any)

WE REQUIRE :

- **COPY OF THE SCHEDULE SHOWING DATE OF ESTABLISHMENT OF ORIGINAL KBLEGALS' DEED; NAME OF DEED, TRUSTEE, MEMBERS FULL NAMES & ADDRESSES WITH DATE OF BIRTH ETC;**

- **IF EXISTING DEED IS NOT A KBLEGALS' DEED WE REQUIRE A COPY OF THE FULL TRUST DEED INCLUDING ESTABLISHMENT DATE, NAME OF DEED, TRUSTEE, MEMBERS FULL NAMES & ADDRESS AND DATE OF BIRTH ETC;**
