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ORDER FORM – SELF MANAGED SUPER FUND - DEED OF VARIATION

YOUR FIRM		
YOUR NAME		
DELIVERY ADDRESS		
DATE	PHONE NO.	FAX NO.

Full Name of the Super Fund	
Date of Original Super Fund	
Specify Clause in the deed enabling a change of the terms of the Deed	
Specify Clause in the Deed enabling the Trustee to Resign or be Replaced	
Effective Date of Deed of Variation	
If you are changing the name of the Fund, insert the new name	

SMSF Current Intent

**If you are altering either Trustees or Members please select the most appropriate description below).
 (Please circle)**

- Fund currently (i.e. before this variation) has a corporate trustee, new members are to join and the members are to be directors of the current corporate trustee
- Fund has a corporate trustee, new members are to join, corporate trustee is to resign and be replaced by the members
- Fund has a corporate trustee, that is to resign and be replaced by the members
- The existing fund members are the trustees of the fund, new members are to join and also become trustees
- The existing fund members are the trustees, new members are to join, trustees are to resign and be replaced by a corporate trustee
- The existing fund members are the trustees, they are to resign and be replaced by a corporate trustee
- Fund currently has two trustees, one a member the other a relative, that are to be replaced by a corporate trustee
- Fund has a corporate trustee that is to resign and be replaced by another corporate trustee

The Laws of which State/Territory apply to this Document	
Year this Document is to be Signed	

Employer Sponsor of the Fund (if relevant)

Full Name	
A.C.N. (if relevant)	
Full Address	
Chairman of the Board (if relevant)	

