

# Update SMSF Trust Deed

<b>Pension Establishment Form Checklist</b>	<b>Required</b>	<b>Completed</b>
Section A – Fund Details	All Cases	
Section B – Prior Deed Details	All Cases	
Section D – Details of Individuals	All Cases	
Section E – Company Details	If Applicable	
Section F and G Disclaimer and Payment of Fee	All Cases	
Forward the completed form ( <b>plus copy of the trust deed and relevant documents</b> ) to:  <p style="text-align: center;"> <b>MSCJ Superannuation Services</b>  <b>PO Box 6339</b>  <b>MITCHELTON QLD 4053</b> </p> <p> <b>Phone: 07 3354 4020 (1300 766 487)</b>  <b>Fax: 07 3354 4021</b> </p>		

## Section A: Fund Details

<b>SMSF Details (Name only if administered by MSCJ Superannuation Services)</b>	
Name of Fund:	
Fund ABN:	
Trustee/s of the Fund: Individual or Company Name & Name of Directors	

## Section B: Prior Deed Details

Trust Deed Details (only if not administered by MSCJ Superannuation Services)	
Date:	Type of Amendment: Rule Change / Trustee Change / Other (Details)
Date:	Type of Amendment: Rule Change / Trustee Change / Other
Date:	Type of Amendment: Rule Change / Trustee Change / Other
Date:	Type of Amendment: Rule Change / Trustee Change / Other
Date:	Type of Amendment: Rule Change / Trustee Change / Other

## Section C: Update Details

Pension Details	
Update Type:	
Rules of the Fund	Yes / No
Add/Remove Trustees	Yes / No (Please complete <b>section D</b> for Individuals and <b>Section E</b> for Corporations)

## Section D: Details of Individuals

1 - Trustee / Director / Member	(Remaining / Adding / Removing)
Title: _____ Surname: _____	First Names: _____
Date of Birth: ___ / ___ / _____	Place of Birth: _____
Tax File Number: ___ / ___ / _____	Occupation: _____
Residential Address: _____	

**2 - Trustee / Director /Member (Remaining /Adding/Removing)**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Names: \_\_\_\_\_  
 Date of Birth: \_\_\_/\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
 Tax File Number: \_\_\_/\_\_\_/\_\_\_\_ Occupation: \_\_\_\_\_  
 Residential Address: \_\_\_\_\_

**3 - Trustee / Director /Member (Remaining /Adding/Removing)**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Names: \_\_\_\_\_  
 Date of Birth: \_\_\_/\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
 Tax File Number: \_\_\_/\_\_\_/\_\_\_\_ Occupation: \_\_\_\_\_  
 Residential Address: \_\_\_\_\_

**4 - Trustee / Director /Member (Remaining /Adding/Removing)**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Names: \_\_\_\_\_  
 Date of Birth: \_\_\_/\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
 Tax File Number: \_\_\_/\_\_\_/\_\_\_\_ Occupation: \_\_\_\_\_  
 Residential Address: \_\_\_\_\_

**5 - Trustee / Director /Member (Remaining /Adding/Removing)**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Names: \_\_\_\_\_  
 Date of Birth: \_\_\_/\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
 Tax File Number: \_\_\_/\_\_\_/\_\_\_\_ Occupation: \_\_\_\_\_  
 Residential Address: \_\_\_\_\_

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## Section G: Order

<b><i>Payment Details</i></b> <i>(Payable prior to set-up unless approved purchaser)</i>	<b>Price (inc GST)</b>	<b>Tick Required</b>
Trust Deed Update – Rules of the fund	\$220	
Trust Deed Update – Add/Remove Trustee	\$220	
	<b>Total Payable</b>	
<b><i>Payment Options</i></b>		
Cheque payable to MSCJ Superannuation Services		
Direct Credit		
Bank:	Bank of Queensland	
BSB:	124-001	
Account:	2169 4710	
	Please email <a href="mailto:admin@mscj.com.au">admin@mscj.com.au</a> when paid	

<b>Special Instructions:</b>

<p>Forward the completed form (<b>plus copy of the original trust deed and any subsequent amendment or variations</b>) to:</p> <p><b>MSCJ Superannuation Services</b>  <b>PO Box 6339</b>  <b>MITCHELTON QLD 4053</b></p> <p>Phone: <b>07 3354 4020 (1300 766 487)</b>          Fax: <b>07 3354 4021</b></p>		
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