

Name of Fund	
Name of Deceased	
Your Full Name	
Your Address	

1. MY RELATIONSHIP TO THE DECEASED IS AS FOLLOWS (e.g. Spouse, De-Facto, Mother, Father, Son or Daughter):

	<i>If you are the spouse or de-facto of the deceased, please complete Part 5 overleaf</i>
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2. THE FOLLOWING ARE THE DETAILS OF THE CHILDREN (INCLUDING STEP-CHILDREN AND ADOPTED CHILDREN) OF THE DECEASED:

Name	Address	Relationship (e.g. son, daughter, step child etc)	Age	Student/Working	For Child Under 18 – Name of Guardian*

* If the guardian of any minor children (children under age 18) is not the person identified in 1. above, please provide the full address of the guardian(s) below:

3. THE FOLLOWING ARE DETAILS OF OTHER DEPENDANTS (E.G. DEPENDANT PARENTS, FINANCIAL DEPENDANTS) OF THE DECEASED:

Name	Address	Relationship	Age	Reason for Dependency

4. FURTHER DETAILS OF WHICH THE TRUSTEE SHOULD BE AWARE (E.G. FAMILY CIRCUMSTANCES) ARE AS FOLLOWS:

5. THIS PART SHOULD BE COMPLETED IF YOU ARE THE SPOUSE OR DE-FACTO OF THE DECEASED:

I,
(insert your full name in block capitals)

of:.....
.....
(insert your full address including postcode in block capitals)

do solemnly and sincerely declare that immediately prior to the death of _____ I had been living with the deceased on a genuine domestic basis as the deceased's **wife/husband** for a period of years.

6. SIGNATURE OF CLAIMANT AND STATUTORY DECLARATION

THIS IS A SOLEMN DECLARATION BY VIRTUE OF THE *STATUTORY DECLARATION ACT 1959* AS AMENDED AND SUBJECT TO THE PENALTIES(1) PROVIDED IN THAT ACT FOR THE MAKING OF FALSE STATEMENTS IN THE STATUTORY DECLARATIONS, CONSCIENTIOUSLY BELIEVING THE STATEMENTS CONTAINED IN THE DECLARATION TO BE TRUE IN EVERY PARTICULAR.

CLAIMANT SIGNATURE §.....

DECLARED AT (LOCATION).....

ON (DATE)**DAY OF**.....**YEAR**.....

BEFORE ME (PRINT NAME OF WITNESS)

SIGNATURE OF WITNESS §.....**WITNESS QUALIFICATIONS**.....

WITNESS ADDRESS

**to be signed before a person for whom a statutory declaration may be made under the law of the State in which the declaration is made. Some examples of such persons are as follows:*

Judge, Magistrate Justice of the Peace, Member of State or Federal Parliament or a member of a local council, an authorised legal practitioner, medical practitioner, pharmacist, dentist, chiropractor, nurse, physiotherapist, psychologist, veterinary surgeon, police officer, Baliff, Bank or building society or Credit Union officer with 5 or more continuous years of service, Commissioner for affidavits, Commissioner for Declarations, Civil Marriage Celebrant or Teacher employed on a full time basis at a school or tertiary institution.

¹ - A person who wilfully makes a false statement in a Statutory declaration under the Statutory Declaration Act 1959 as amended is guilty of an offence against this Act the punishment for which is a fine not exceeding \$200 or imprisonment for a term not exceeding 6 months or both if the offence is prosecuted summarily, or imprisonment for a term not exceeding four years if the offence is prosecuted upon indictment.