# Statement from SMSF auditor supervisor

*[Each of the supervisors listed in your application should prepare a separate statement.]*

Date:

1. I have read the statement of SMSF audit experience for the application for registration as an approved SMSF auditor from *[insert name of applicant]* (the ‘Applicant’) and dated *[insert date of application]*.
2. I am a supervisor referred to in the application.
3. I am not aware of any matter or circumstance which would indicate that the information contained in the application is incorrect or misleading.
4. The applicant has requested I provide a letter in support of their application for registration as an approved SMSF auditor.
5. I support the claims made by the applicant and confirm the SMSF audit work conducted under my supervision as signing auditor for the funds.
6. I confirm that the applicant was a member of the engagement team and was supervised in accordance with auditing standards ASA 200 *Quality Control for an Audit of a Financial Report and Other Historical Financial Information* (and relevant Auditing and Assurance Standards Board assurance standards) and that details of who performed the audit work, and the dates such work was completed, has been documented in the relevant audit engagement files in accordance with paragraph 9 of ASA 230 *Audit Documentation.*
7. I confirm that the applicant has *[insert number of audit hours]* hours of supervised audit experience. The hours of experience being confirmed is work auditing SMSF’s under my direction as an approved SMSF auditor as required by s128B(1)(a)(ii) of the *Superannuation Industry (Supervision) Act 1993* and does not include non-audit related work.
8. I have/have not *[delete inapplicable clause]* maintained records of the applicant's hours of audit work on SMSF audits.
9. The types of functions undertaken by the applicant in performing the audits were *[list functions performed]*.

OR

1. All audit work associated with the audits performed was completed by the applicant.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SMSF Supervisor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SAN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_