

FreedomPlan® / FuturePlan® Amendment Request

If you would like help in completing the form, please phone us on **0508 FISHER (0508 347 437)**, if calling from overseas **+64 9 445 3377**.

You can complete this form on-screen by typing directly into each field. Once you have completed your details, please print, sign and post the form to **Fisher Funds Management Limited, C/- Trustees Executors Limited, PO Box 409, Wellington 6140** or email to **yourplan@fisherfunds.co.nz**.

Who should complete this form?

Complete this form if you wish to change your PIR, IRD number, contribution frequency, investment direction or investment funds for your FreedomPlan®, FuturePlan® or IndependencePlan®.

Section 1: Member Details

Account Number

IRD Number

Prescribed Investor Rate (PIR) (please tick one).

 10.5% 17.5% 28%

To work out your PIR, or for more information, visit www.fisherfunds.co.nz/pircalculator or call us on 0508 347 437.

Title

First Name/s

Surname

Date of Birth

 / /

Address

City

Country

Postcode

Home Phone

 ()

Work Phone

 ()

Mobile

 ()

Email Address

Employer

Section 2: Previous Details (if applicable)

Title

First Name/s

Surname

Section 3: Contributions

Regular Contributions

Please start/change my regular contribution:

New Dollar Amount

Start Date

Frequency of Contribution

Fortnightly

Monthly

Please note, the minimum fortnightly contribution is \$50 and the minimum monthly contribution is \$100.

Lump Sum Contribution

Please invest my lump sum contribution in my FreedomPlan, FuturePlan or IndependencePlan.

Amount to Invest

Payment Method (please tick)

Cheque

The cheque attached is made payable to Fisher Managed Funds. Send this form together with your cheque to: Fisher Funds Management Limited, C/- Trustees Executors Limited, PO Box 409, Wellington 6140.

Direct Credit

Payment was direct credited to the following bank account on

Account Name

TEA Custodians Ltd o/a Fisher Funds

Account Number

0

2

0

5

0

6

0

0

3

8

6

1

2

0

0

1

Bank

Branch

Account Number

Suffix

Note: Please include your reference details with your payment. Information to be included is your surname, initials and your plan number. Failure to supply correct reference details will result in a delay in crediting your payment to your account.

Transfer from another investment

If you wish to add to your FreedomPlan, FuturePlan or IndependencePlan by transferring from another investment, please complete the transfer details below. Please contact your existing fund manager as there may be forms you need to complete to transfer your investment.

Transfer all Funds

Other (amount to transfer) \$

Please provide details as to where your funds will be transferred from:

Fund Manager	Product Name	Account Plan / Number

Please Invest my Lump Sum Contribution Using (tick one)

My existing investment strategy

The investment options I have nominated in Section 4

Section 4: Investment Direction

Select all that apply:

- Change the investment strategy for your future contributions only
- Change the investment strategy for your current account balance only
- Change the investment strategy for **both** your contributions and your current account balance

Please show percentages in whole numbers and ensure that this totals 100%

Investment Fund	Future Contributions	Current Account Balance	Lump Sum Contribution
Emerging Markets Fund ¹	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Balanced Fund	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Capital Protected Fund	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Growth Fund	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
International Companies Fund	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Trans Tasman Equity Fund ^{1, 2}	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Property Fund ¹	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Total % (Must total to 100%)	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %

¹ Only investors who have invested in these Funds previously are eligible to invest in these Funds.

² Not available for FreedomPlan investors.

Section 5: Adviser Details

Did you talk to a financial adviser about the changes to your investment?

- No Yes (If "yes", please complete adviser details)

Adviser Name

FSP Number (if known)

Company Name

Section 6: Amendment Request Authorisation

I hereby authorise Fisher Funds Management Limited to make changes in accordance with my instructions on this form.

Signature

Date

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