

# Investment Series Regular Withdrawal Request

If you would like help in completing this form, please email [enquiries@fisherfunds.co.nz](mailto:enquiries@fisherfunds.co.nz) or phone us on **0508 FISHER (0508 347 437)**.

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 [enquiries@fisherfunds.co.nz](mailto:enquiries@fisherfunds.co.nz).

## Who should complete this form?

Please use this form to set-up a regular withdrawal from your Fisher Funds Investment Series account.

## Section 1: Account Details

Account Name/s

  


Fisher Funds Account Number

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Address

City

Country

Postcode

Home Phone

Work Phone

Mobile

Email Address

### Investor 1

IRD Number

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Prescribed Investor Rate (PIR) (please tick one)

<input type="checkbox"/>	10.5%	<input type="checkbox"/>	17.5%	<input type="checkbox"/>	28%
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### Investor 2

IRD Number

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Prescribed Investor Rate (PIR) (please tick one)

<input type="checkbox"/>	10.5%	<input type="checkbox"/>	17.5%	<input type="checkbox"/>	28%
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To work out your PIR, or for more information, visit [fisherfunds.co.nz/pircalculator](http://fisherfunds.co.nz/pircalculator) or call us on 0508 347 437.

If your selected PIR differs to the rate we have on file, the change will require 1 business day to update before your withdrawal can be processed. If you do not select a PIR, your withdrawal will be processed at the rate we hold on file for this account.

## Section 2: Regular Withdrawal Options

Set-up a regular withdrawal from the account as outlined below (please note the minimum withdrawal amount is \$100)\*

### Name of Fund/s

<input type="text" value="CashPlus Fund"/>
<input type="text" value="New Zealand Fixed Income Trust"/>
<input type="text" value="BondPlus Fund"/>
<input type="text" value="Multi Sector Fund"/>
<input type="text" value="Trans Tasman Equity Trust"/>
<input type="text" value="Global Fund"/>

### Amount of withdrawal\*

<input type="text"/>	units or \$	<input type="text"/>
<input type="text"/>	units or \$	<input type="text"/>
<input type="text"/>	units or \$	<input type="text"/>
<input type="text"/>	units or \$	<input type="text"/>
<input type="text"/>	units or \$	<input type="text"/>
<input type="text"/>	units or \$	<input type="text"/>
<b>Total</b>	<b>units or \$</b>	<input type="text"/>

\*Regular withdrawals can only be paid into a New Zealand bank account.

Start Date

Frequency

☐ Monthly ☐ Quarterly ☐ Annually

\*Please note this is the date your withdrawal will be priced, it will then be paid 3-5 working days after this date. Please bear this in mind if you want to receive the funds by a certain date.

## Section 3: Payment Details

We will only make payments in New Zealand dollars to a New Zealand bank account held in your name either individually or jointly. We will adjust your withdrawal for any tax liability.

Name of Bank Account

Account Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Bank

Branch

Account Number

Suffix

Name of Bank and Branch Address

## Section 4: Proof of your Bank Account

Please provide proof of the bank account name and number you would like the funds paid into by supplying any one of the following:

- a pre-coded deposit slip
- a copy of a cheque
- a copy of a bank statement
- an over-the-counter printed receipt with a teller's stamp
- an online bank account statement with the name of the bank in the header/footer

## Section 5: Identity Documents

Your application must be submitted with one of the identity document options set out in the table below. Please note we require this for each unit holder.

If these documents have been provided to us **after 30 June 2013**, they do not need to be provided again.

OPTION 1	OPTION 2	OPTION 3
<p><b>One of the following:</b></p> <ul style="list-style-type: none"><li>■ Passport* (<i>pages containing name, date of birth, photograph and signature</i>)</li><li>■ New Zealand certificate of identity</li><li>■ New Zealand refugee travel document</li><li>■ Emergency travel documents</li><li>■ New Zealand firearms licence</li><li>■ National identity card (<i>containing name, date of birth, photograph and signature</i>)</li></ul>	<p><b>One of the following:</b></p> <ul style="list-style-type: none"><li>■ Full birth certificate*</li><li>■ Certificate of citizenship</li></ul> <p><b>PLUS one of the following:</b></p> <ul style="list-style-type: none"><li>■ New Zealand or overseas driver licence</li><li>■ 18+ Card</li></ul>	<ul style="list-style-type: none"><li>■ New Zealand driver licence</li></ul> <p><b>PLUS one of the following:</b></p> <ul style="list-style-type: none"><li>■ New Zealand SuperGold Card</li><li>■ Bank statement dated within the last 12 months</li><li>■ Statement from a government agency dated within the last 12 months</li></ul>

\*If you are supplying foreign identity documents you must also supply proof of New Zealand residency.

## Section 6: Certifying your Identity Documents

Identity documents **must be** certified by one of the following people:

- Justice of the Peace
- Registered Teacher
- Notary Public
- Registered Solicitor
- Registered Doctor
- Member of Parliament
- Chartered Accountant
- Police Officer

Identity documents **cannot be** certified by the following people:

- Yourself
- Someone related to you
- Your spouse or partner
- Someone who lives at the same address as you
- A person benefitting from this withdrawal

The person certifying your documents must write the following statement on the copies of your documents:

***"I certify this to be a true copy of the original document and confirm it represents the identity of (full name)."***

The person certifying your documents must include the following details:

- Their name
- Their signature
- Their occupation
- The date of certification

Certification must have been carried out within three months of your application. If you wish, you may personally bring your identity documents to the Fisher Funds office and we will copy and verify your documents.

**Please do not send in original versions of your identity documents.**

## Section 7: Proof of Address

Please provide proof of your physical address (*not a PO Box*) by sending us a copy of an invoice, statement, letter or contract in your name, dated within the last 12 months, from one of the sources outlined below. Please note we require this for each unit holder.

- utility providers e.g. water, electricity, gas, telecommunications
- professional service providers e.g. lawyer, accountant, doctor
- major service providers e.g. Sky TV, internet provider, newspaper, insurance
- central or local government correspondence e.g. IRD, benefit statement, rates notice
- current employer payslip
- bank correspondence or statement
- tenancy agreement

## Section 8: Declaration

I/we agree that the Supervisor and Fisher Funds Management Limited (*and related entities*) may collect and use the information set out in (*or in connection with*) this form for the purpose for which it is provided. Additionally, they may use that information to promote to me/us other products and services of Fisher Funds group of companies. Fisher Funds will provide me/us (*on request*) with the name and address of any entity to which information has been disclosed. If I/we do not provide the information required by this form, Fisher Funds and/or the Supervisor may not be able to process my/our request. I/we have the right to access all personal information held about me/us. If any of the information is incorrect, I/we have the right to have it corrected. The information set out in this form will be collected and held by Fisher Funds Management Limited and Trustees Executors Limited whose respective addresses are Level 1, Crown Centre, 67-73 Hurstmere Road, Takapuna, Auckland 0622 and Level 5, 10 Customhouse Quay, Wellington 6140.

I/we hereby request the following withdrawal to my/our investment in accordance with the provisions of the Fisher Funds Investment Series Governing Document.

Signature

Date

Signature

Date

Signature

Date