

Withdrawal Form

Return to New Zealand Funds Management Limited, Private Bag 92226, Auckland 1142 or email to withdrawals@nzfunds.co.nz

1 | Client details

Account name

NZ Funds client number

N	Z	F							
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Type of client

Individual or joint

Company

Trust

Other

(Please specify)

2 | Withdrawal instructions

Portfolio

Code

Withdrawal notice period

Withdrawal (\$ or "all")

Income Generator Portfolio

IGN

7 days

\$

Withdrawals are permitted only after expiry of the relevant notice period. Withdrawal proceeds are normally paid to your nominated bank account within four business days of expiry of the withdrawal notice period.

For more details, please refer to the section headed 'Withdrawing your investments' in the NZ Funds Income Generator Product Disclosure Statement.

3 | Regular withdrawals

Your regular withdrawals will continue until you advise NZ Funds otherwise.

Portfolio name	Notice period	Frequency*	Amount	Start date**			New/Amend
				Day	Month	Year	
Income Generator	7 days	<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> N <input type="radio"/> A

* Frequency periods for regular withdrawals are F - fortnightly, M - monthly or Q - quarterly.

** Please note that any withdrawal notice period that applies must expire before the first regular withdrawal payment commences.

This form cannot be processed unless fully completed and signed.

Continued over...

5 | Client signature(s)

I/we agree to the Terms set out above.

If signing on behalf of an Individual/Company, please name the Individual/Company.

Where there is more than one individual associated with the account, all individuals must sign below.

Individual 1

Day Month Year

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Individual 2

Day Month Year

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Individual 3

Day Month Year

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Financial Adviser use only

I confirm I am an Financial Adviser authorised to provide financial adviser services in relation to this transaction.

Adviser name

Adviser FSP number

Adviser company

Adviser code

Adviser signature

Day Month Year

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Note

The Anti-Money Laundering and Countering Financing of Terrorism Act 2009 requires verification of identity. In certain circumstances you may be required to complete AML Forms. Please ensure all the relevant AML forms are completed in full, if applicable.

This form cannot be processed unless fully completed and signed.