

Retirement Withdrawal Form

For members who joined after 1 July 2019 aged 65 or over at the time of joining

If you would like help in completing this form, please email **kiwisaver@fisherfunds.co.nz** or phone us on **0800 FF KIWI (0800 335 494)**.

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**, **Private Bag 93502**, **Takapuna**, **Auckland 0740** or email to **kiwisaver@fisherfunds.co.nz**.

Who should complete this form?

Please use this form to apply for a retirement withdrawal from your Fisher Funds KiwiSaver Scheme or Fisher Funds TWO KiwiSaver Scheme account ("KiwiSaver account"). You can select a full, partial or regular withdrawal. If you wish to request both a partial and regular withdrawal, you can select both options on this form.

Section 1: Your Details		
Title First Name/s		
Surname		
- (5: 1		
Date of Birth KiwiSa	r Account No. IRD Number	
Prescribed Investor Rate (PIR)	ease tick one)	
10.5% 17.5%	28%	
To work out your PIR, or for mo	information, visit <u>fisherfunds.co.nz/pircalculator</u> or call us on 0508 347 437.	
	ate we have on file, the change will require 1 business day to update before your with	
can be processed. It you do not Address	elect a PIR, your withdrawal will be processed at the rate we hold on file for this accour	nt.
Address		
City	Country Postcode	
Home Phone	Work Phone Mobile	
()	()	
Email Address		

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Under normal circumstances withdrawal requests are processed and paid to you within 5 business days. This may change if any required information is missing, or under certain exceptional circumstances as outlined in the Governing Documents for the Schemes.			
Partial Withdrawal			
Withdraw \$ (minimum withdrawal amount is \$500)			
Regular Withdrawal We require at least two business days to set up a regular withdrawal from receipt of this withdrawal request.			
If you are invested in more than one Fund we will withdraw an amount from each Fund in line with the proportion in which are you currently invested in each Fund. Alternatively, please contact us on 0800 FF KIWI (0800 335 494) to discuss how you would like your withdrawal deducted.			
Set up a regular withdrawal facility \$ (minimum withdrawal amount is \$100 regardless of frequency)			
Start Date Frequency			
/ / Weekly Fortnightly 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.			
Full Withdrawal			
Withdraw my full account balance and close my KiwiSaver account			
Transfer my Balance			
If you would like to transfer your KiwiSaver account balance to another Fisher Funds investment please call us on 0800 FF KIWI (0800 335 494) to discuss the options available and how we can help you.			
Constitute 2: December 11.			
Section 3: Payment Details			
Please pay the withdrawal into my nominated bank account held on file.			
If you have not previously provided your bank account details including proof of the bank account or your bank account has changed, please complete the section below and provide proof of your bank account (refer below) along with this form.			
We will only make payments in New Zealand dollars to either a New Zealand bank account or an international bank account held in your name either individually or jointly (the cost of an international transfer is paid by the member). Any payment will be adjusted for tax at the notified Prescribed Investor Rate (PIR) on your account.			
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Section 4: Privacy Statement

Any information that you provide to us may be used by Fisher Funds and the Supervisor and any of their respective related entities, and by other service providers to provide services in relation to your withdrawal request. You have the right to access the information held by us and you may also request that it be corrected.

Section 5: Declaration

Name

- I am applying to withdraw or transfer some or all of my KiwiSaver account. I understand that on full payment of my KiwiSaver account, my account will be closed and I agree to release all claims that have been made by me on the Manager and/or Supervisor in relation to my KiwiSaver account.
- I understand that my withdrawal value may fluctuate based on the unit price(s) which applies when the withdrawal is processed and that fees, taxes and expenses may be deducted from my KiwiSaver account.
- I am entitled to make this withdrawal request and the information given in this form is true and correct. I acknowledge that the Manager and the Supervisor will rely on information provided in (or in connection with) this form and accordingly agree to indemnify them against any claims, liability, losses, damages, costs and expenses whatsoever which may arise directly or indirectly as a result of any information provided in (or in connection with) this form being untrue or misleading (including omission).
- I understand that the Manager and/or Supervisor will not be able to complete its assessment of this withdrawal if the information given in this form is incomplete or incorrect, or if all of the required identification documents or proof of address were not provided at the time I joined my KiwiSaver account.
- I understand the information supplied by me with this withdrawal request can be used to electronically verify my identity and address (where necessary) and may be disclosed for these purposes to third parties where relevant.

Date

Signature

■ I have read the privacy statement in this form.

Checklist			
Please compete the checklist below and supply the relevant documents to support your request.			
I joined KiwiSaver for the first time on or after 1 July 2019.			
Complete Sections 1-5.			
Provide proof of your bank account (refer to Section 3 for our requirements).			

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