



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

Category	Portfolio	Code	Withdrawal notice period	Withdrawal (\$ or "all")
Cash	Core Cash Portfolio	DCP	None	\$ <input type="text"/>
Income	Core Income Portfolio	SIP	21 days	\$ <input type="text"/>
	Global Income Portfolio	GIP	21 days	\$ <input type="text"/>
Inflation	Core Inflation Portfolio	IPP	21 days	\$ <input type="text"/>
	Property Inflation Portfolio	DHG	21 days	\$ <input type="text"/>
	Equity Inflation Portfolio	DGSP	21 days	\$ <input type="text"/>
Growth	Core Growth Portfolio	ADG	21 days	\$ <input type="text"/>
	Global Equity Growth Portfolio	AGP	21 days	\$ <input type="text"/>
	Dividend and Growth Portfolio	DIP	21 days	\$ <input type="text"/>
Total				\$ <input type="text"/>

Withdrawals are permitted only after expiry of the relevant notice period. Redemption proceeds are normally paid to your nominated bank account within four business days of expiry of the withdrawal notice period, or where no notice period applies, within four business days of a withdrawal form being received and processed.

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

This form cannot be processed unless fully completed and signed.

Continued over...

3 | Regular withdrawals

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

Please note that regular withdrawals are permitted only from the following Portfolios.

Category	Portfolio name	Notice period	Frequency*	Amount	Start date**			New/Amend	
					Day	Month	Year	N	A
Cash	Core Cash Portfolio	None		\$					
Income	Core Income Portfolio	21 days		\$					
	Global Income Portfolio	21 days		\$					

* 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.

4 | Payment details

Please direct credit the proceeds of my/our withdrawal to

Account name

Account number

Bank	Branch	Account number	Suffix

OR

Please pay the proceeds of my/our withdrawal by cheque.

Made payable to

Sent to

Reason(s) for withdrawal

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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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Authorised Financial Adviser use only

I confirm I am an Authorised 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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Please indicate by ticking the appropriate box if a final fee is payable or requires amendment in relation to the withdrawal and the amount of that fee:

Final ongoing fee

Amount

\$

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.

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