

KiwiSaver Investment Switch Form

If you would like help in completing this form, please email kiwisavertwo@fisherfunds.co.nz or phone us on **0800 20 40 60**.

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, Private Bag 93502, Takapuna, Auckland 0740**, send by courier to **Fisher Funds Management Limited, Crown Centre, 67-73 Hurstmere Road, Takapuna, Auckland 0622**, or email to kiwisavertwo@fisherfunds.co.nz.

Who should complete this form?

This form is for existing Fisher Funds TWO KiwiSaver Scheme investors only. Before completing this form you should refer to the latest product disclosure statement for the Scheme to see what changes you can make to your investments and for details about the investment options and the fees that may apply.

If you are unsure about choosing an investment strategy, you may wish to seek advice from a financial adviser. Alternatively, you can complete our investor profile questionnaire to help you work out what type of investor you are and suggest an investment strategy that might suit your needs. You can find the investor profile questionnaire on our website at ff2kiwisaver.co.nz/about-the-scheme/kiwisaver-investor-profile.

Important note: the Cash Enhanced Fund closed to new investors on 1 December 2021. If you are an existing investor in the Cash Enhanced Fund and you make a full switch to another fund, you will not be able to switch back to the Cash Enhanced Fund.

Section 1: Your Details

Title	First Name/s	
<input type="text"/>	<input type="text"/>	
Surname		
<input type="text"/>		
Account Number	Date of Birth (<i>please reconfirm for security purposes</i>)	
<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"/>	
Postal Address		
<input type="text"/>		
City	Country	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone	Work Phone	Mobile
(<input type="text"/>) <input type="text"/>	(<input type="text"/>) <input type="text"/>	(<input type="text"/>) <input type="text"/>
Email Address		
<input type="text"/>		

Note: We will update your account with the contact details you provide above.

Section 2: Investment Switch Details

You may invest in any one of the following investment options. Both your current Fisher Funds TWO KiwiSaver Scheme account balance and your future contributions will be invested as per this instruction.

OPTION 1 - GlidePath

To select GlidePath please tick this box

OPTION 2 - Select an investment strategy

Please tick the relevant box below:

	Switch my existing balance	Redirect my future contributions
Conservative strategy (100% Conservative Fund)	<input type="checkbox"/>	<input type="checkbox"/>
Balanced strategy (100% Balanced Fund)	<input type="checkbox"/>	<input type="checkbox"/>
Growth strategy (100% Growth Fund)	<input type="checkbox"/>	<input type="checkbox"/>

OPTION 3 - Build your own investment strategy

Simply complete the table below. Please show the percentages in whole numbers and ensure that this totals 100%.

	Switch my existing balance	Redirect my future contributions
Preservation Fund	<input type="text"/> %	<input type="text"/> %
Conservative Fund	<input type="text"/> %	<input type="text"/> %
Balanced Fund	<input type="text"/> %	<input type="text"/> %
Growth Fund	<input type="text"/> %	<input type="text"/> %
Equity Fund	<input type="text"/> %	<input type="text"/> %
Totals must equal 100%	<input type="text"/> %	<input type="text"/> %

Section 3: Authorisation and Declaration

I hereby request Fisher Funds to direct future investments and/or transfer my current investments in accordance with my instructions in this form and declare that:

- I am authorised to make investment decisions for this account
- I have read the current Fisher Funds TWO KiwiSaver Scheme Product Disclosure Statement
- I understand that any change requested will be implemented as soon as practicable after receipt of this request
- I understand that the value of my investments upon withdrawal from any fund, and investment or reinvestment into any fund will be based on the unit price which applies when the transaction is processed and that any fees, taxes and expenses may be deducted from my account.

Signature*

Date

*For a member aged below 16, this form must be signed not by the member but by a legal guardian of the member. Members aged 16 or over may exercise membership-related discretions themselves.